

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM SPAC
COVER SHEET PG 2**

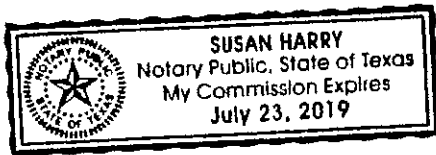
12 COMMITTEE NAME
Committee for Austin's Children

13 Filer ID (Ethics Commission Filers)
00081923

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 / # A	ELECTION DATE Month Day Year 11/07/2017
		DESCRIPTION Support AISD school bond election	

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)	\$	\$172,612.20
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	\$0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	\$202,794.06
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	\$85,021.17
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	\$4,000.00

16 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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.

Greg Hartman

Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said Greg Hartman, this the 30th day of October, 2017, to certify which, witness my hand and seal of office.

Susan Harry Susan Harry Notary

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 29

17 COMMITTEE NAME Committee for Austin's Children		18 Filer ID 00081923	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	66,937.20
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	925.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	104,750.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
6.	<input checked="" type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	22,000.00
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	202,794.06
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: 1/11 Rpt: 4/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/26/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abell, Hughes & Betsy	7 Amount of Contribution (\$) \$5,000.00
6 Contributor address; City; State; Zip Code 1102 Enfield Rd. Austin, TX 78703		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/14/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert, David	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1101 Grove Blvd # 703 Austin, TX 78741		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird, Kirby	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Austin, TX 78721		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/01/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Belew, Kim	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 7701 Shadyrock Drive Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/26/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blazier, John	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 901 S. Mopac Bldg. V, Ste. 200 Austin, TX 78746		
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: 2/11 Rpt: 5/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/26/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Paul	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 2615 Harris Blvd. Austin, TX 78703		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/21/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caballero, Suzanna & John	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code 2020 Simond Ave Unit 3 Austin, TX 78723		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castro de Barrera, Veronica	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4229 Mattie St. Austin, TX 78723		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/08/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cayton Barden, Rachael	Amount of Contribution (\$) \$47.68
Contributor address; City; State; Zip Code 8828 Mountain Path Circle Austin, TX 78759		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cisneros, Heidi	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6926 N Lamar Blvd Austin, TX 78752		
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: 3/11 Rpt: 6/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/03/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Aiden	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 4305 Camacho Austin, TX 78723	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/30/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colt, Anl	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code 4314 Vaughan Street #266 Austin, TX 78723	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coronado, Dawn	Amount of Contribution (\$) \$210.84
	Contributor address; City; State; Zip Code 5602 Palisade Ct Austin, TX 78731	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cowan, Tommy	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 5407 Bull Run Circle Austin, TX 78727	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Los Santos, Christina	Amount of Contribution (\$) \$31.89
	Contributor address; City; State; Zip Code 7003 Shoal Creek Blvd. Austin, TX 78757	
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: 4/11 Rpt: 7/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/27/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Endeavor Real Estate Group, Ltd.	7 Amount of Contribution (\$) \$10,000.00
	6 Contributor address; City; State; Zip Code 500 W. 5th St. Ste. 700 Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/09/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fields, Johnnie C.	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 1101 Capital of Texas Hwy. Bldg. A, Suite 101 Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Ashley	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 4124 Lawless Street Austin, TX 78723	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/01/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzpatrick, John	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1706 Nickerson St. Austin, TX 78704	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fourth Lamar, LLC	Amount of Contribution (\$) \$2,000.00
	Contributor address; City; State; Zip Code 405 N. Lamar Blvd. Ste. 200 Austin, TX 78703	
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: 5/11 Rpt: 8/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottesman, Sanford	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code 1900 Scenic Dr. Austin, TX 78703	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/18/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grayson, Mark	Amount of Contribution (\$) \$105.58
	Contributor address; City; State; Zip Code 9212 Meadow Vale Austin, TX 78758	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HBA Home PAC	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code 8140 Exchange Dr. Austin, TX 78754	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haddon & Cowan Architects Collaborative LLC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 2301 E. Riverside Dr. Bldg. A, Ste. 80 Austin, TX 78741	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harshman, Melanie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 4116 Camacho St. Austin, TX 78723	
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: 6/11 Rpt: 9/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ho, Nhat <hr/> 6 Contributor address; City; State; Zip Code 2117 Robert Browning St. Austin, TX 78723	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/13/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Kevin <hr/> Contributor address; City; State; Zip Code 3503 Bachelor Gulch Leander, TX 78641	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holmes, John <hr/> Contributor address; City; State; Zip Code 6000 Lonesome Valley Trail Austin, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/22/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Husch Blackwell LLP <hr/> Contributor address; City; State; Zip Code 190 Corondelet Plaza Ste. 600 St. Louis, MO 63105	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2017	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00027342) IBEW PAC Voluntary Fund <hr/> Contributor address; City; State; Zip Code 900 Seventh Street, NW Washington, DC 20001	Amount of Contribution (\$) \$5,000.00
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: 7/11 Rpt: 10/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/06/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Intelligence Engineering Services, LLP	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 10001 Reunion Place Blvd. Ste. 200 San Antonio, TX 78216		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/26/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Michael	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code 600 N. Marienfeld St. Ste. 906 Midland, TX 79701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liao, Ursula	Amount of Contribution (\$) \$37.16
Contributor address; City; State; Zip Code 2732 Tom Miller St Austin, TX 78723		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liberal Austin Democrats	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code P.O. Box 49712 Austin, TX 78765		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lipscombe, John	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6600 Mesa Dr. Austin, TX 78731		
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: 8/11 Rpt: 11/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/07/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michel, Travis	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 2707 Zach Scott Austin, TX 78723		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/17/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Andy	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code 105 W. Elizabeth St. Austin, TX 78704		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nortey, James	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 2033 Philomena Street Austin, TX 78723		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Lisa	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 4432 Camacho St. Austin, TX 78723		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/01/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phipps, Ann E.	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 2100 Stamford Lane Austin, TX 78703		
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: 9/11 Rpt: 12/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/27/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RECA-Business M/PAC 6 Contributor address; City; State; Zip Code 98 San Jacinto Blvd. Ste. 510 Austin, TX 78701	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/04/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rappoport, Jennifer Contributor address; City; State; Zip Code 2049 Antone St. Austin, TX 78723	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Geronimo Contributor address; City; State; Zip Code 905 Philco Dr. Austin, TX 78745	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/04/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santamaria-Dalnton, Vanessa Contributor address; City; State; Zip Code 4120 Threadgill St Austin, TX 78723	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stonewall Democrats of Austin PAC Contributor address; City; State; Zip Code P.O. Box 40898 Austin, TX 78704	Amount of Contribution (\$) \$200.00
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: 10/11 Rpt: 13/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/22/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamminga, William <hr/> 6 Contributor address; City; State; Zip Code 1716 Cliffwood Austin, TX 78733	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/26/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) United Assoc. of Journeymen & Apprentices of the Plumbing & Pipefitting <hr/> Contributor address; City; State; Zip Code 814 Airport Blvd. Austin, TX 78702	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/27/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Doyle <hr/> Contributor address; City; State; Zip Code P.O.Box 26427 Austin, TX 78755	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Marta <hr/> Contributor address; City; State; Zip Code 2260 Zach Scott Austin, TX 78723	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Mark <hr/> Contributor address; City; State; Zip Code 2801 Scenic Drive Austin, TX 78703	Amount of Contribution (\$) \$250.00
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: 11/11 Rpt: 14/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 09/30/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willis, Jolie <hr/> 6 Contributor address; City; State; Zip Code 106 E. Lisa Dr. Austin, TX 78752	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/03/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willis, K.C. <hr/> Contributor address; City; State; Zip Code 3103 Honey Tree Ln Austin, TX 78746	Amount of Contribution (\$) \$263.47
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 15/29	
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/17/2017	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julie Cowan Campaign 7 Contributor address; City; State; Zip Code 4304 Tallowood Dr. Austin, TX 78731	8 Amount of contribution (\$) \$300.00	9 In-kind contribution description food and drinks for event <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/27/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Speer, Joy Contributor address; City; State; Zip Code 1900 Forest Trail Austin, TX 78703	Amount of contribution (\$) \$625.00	In-kind contribution description stickers <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/3 Rpt: 16/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/24/2017	5 Corporation / Labor Organization name AECOM Technology Corporation	7 Amount of contribution (\$) \$25,000.00
	6 Corporation / Labor Organization address; City; State; Zip Code 9400 Amberglen Blvd. Bldg. C Austin, TX 78729	
Date 10/12/2017	Corporation / Labor Organization name Ann Richards Foundation	Amount of contribution (\$) \$10,000.00
	Corporation / Labor Organization address; City; State; Zip Code PO Box 41072 Austin, TX 78704	
Date 10/24/2017	Corporation / Labor Organization name Austin Chamber of Commerce	Amount of contribution (\$) \$5,000.00
	Corporation / Labor Organization address; City; State; Zip Code 535 East 5th St. Austin, TX 78701	
Date 10/05/2017	Corporation / Labor Organization name Barnes Gromatzky Kosarek Architects, Inc.	Amount of contribution (\$) \$500.00
	Corporation / Labor Organization address; City; State; Zip Code 1508 W. 5th St. Ste. 200 Austin, TX 78703	
Date 10/25/2017	Corporation / Labor Organization name CTA Inc.	Amount of contribution (\$) \$1,500.00
	Corporation / Labor Organization address; City; State; Zip Code 3601 S. Congress Ave. Austin, TX 78704	
Date 10/17/2017	Corporation / Labor Organization name Catellus Development Corporation	Amount of contribution (\$) \$10,000.00
	Corporation / Labor Organization address; City; State; Zip Code 66 Franklin Street Suite 200 Oakland, CA 94607	
Date 10/10/2017	Corporation / Labor Organization name Doucet & Associates	Amount of contribution (\$) \$750.00
	Corporation / Labor Organization address; City; State; Zip Code 7401 B Hwy 71 West, Suite 160 Austin, TX 78735	

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 2/3 Rpt: 17/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/24/2017	5 Corporation / Labor Organization name Fifth & Baylor, Ltd. <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code 405 N. Lamar Blvd. Ste. 200 Austin, TX 78703	7 Amount of contribution (\$) \$2,000.00
Date 10/24/2017	Corporation / Labor Organization name Fifth Lamar Retail I, Ltd. <hr/> Corporation / Labor Organization address; City; State; Zip Code 405 N. Lamar Blvd. Ste. 200 Austin, TX 78703	Amount of contribution (\$) \$2,000.00
Date 10/24/2017	Corporation / Labor Organization name Frost Bank <hr/> Corporation / Labor Organization address; City; State; Zip Code P.O. Box 1600 San Antonio, TX 78296	Amount of contribution (\$) \$2,500.00
Date 10/24/2017	Corporation / Labor Organization name J. Robinson Architects, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code PO Box 26426 Austin, TX 78755	Amount of contribution (\$) \$3,000.00
Date 10/24/2017	Corporation / Labor Organization name Lamar-Schlosser, Inc. <hr/> Corporation / Labor Organization address; City; State; Zip Code 405 N. Lamar Blvd. Ste. 200 Austin, TX 78703	Amount of contribution (\$) \$2,000.00
Date 10/24/2017	Corporation / Labor Organization name Lamar-Sixth-Austin, Ltd. <hr/> Corporation / Labor Organization address; City; State; Zip Code 405 N. Lamar Blvd. Ste. 200 Austin, TX 78703	Amount of contribution (\$) \$2,000.00
Date 10/06/2017	Corporation / Labor Organization name Lyft <hr/> Corporation / Labor Organization address; City; State; Zip Code 185 Berry Street San Francisco, CA 94110	Amount of contribution (\$) \$8,000.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 3/3 Rpt: 18/29
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/02/2017	5 Corporation / Labor Organization name McKinstry	7 Amount of contribution (\$) \$1,500.00
	6 Corporation / Labor Organization address; City; State; Zip Code 13465 Midway Road, Ste 100 Dallas, TX 75244	
Date 10/24/2017	Corporation / Labor Organization name Midtown Group, Inc.	Amount of contribution (\$) \$5,000.00
	Corporation / Labor Organization address; City; State; Zip Code 610 Guadalupe St. Austin, TX 78701	
Date 10/17/2017	Corporation / Labor Organization name Page Southerland Page, Inc.	Amount of contribution (\$) \$3,000.00
	Corporation / Labor Organization address; City; State; Zip Code 1100 Louisiana St. Ste. One Houston, TX 77002	
Date 10/08/2017	Corporation / Labor Organization name RedLeaf Properties LLC	Amount of contribution (\$) \$1,000.00
	Corporation / Labor Organization address; City; State; Zip Code 4015 Guadalupe St. Austin, TX 78751	
Date 09/29/2017	Corporation / Labor Organization name Stratus Properties	Amount of contribution (\$) \$10,000.00
	Corporation / Labor Organization address; City; State; Zip Code 212 Lavaca St. Ste. 300 Austin, TX 78701	
Date 10/22/2017	Corporation / Labor Organization name Texas Disposal Systems, Inc.	Amount of contribution (\$) \$10,000.00
	Corporation / Labor Organization address; City; State; Zip Code P.O. Box 17126 Austin, TX 78760	

PLEGGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE D

The Instruction Guide explains how to complete this form.		1 Total pages Schedule D: Sch: 1/2 Rpt: 19/29	
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923	
4 Date 10/19/2017	5 Corporation / Labor Organization Name Austin Business Furniture	7 Amount of pledge (\$) \$5,000.00	8 In-kind description (if applicable)
	6 Corporation / Labor Organization address; City; State; Zip Code 4030 W Braker Lane, #100 Austin, TX 78759	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Date 10/02/2017	Corporation / Labor Organization Name Bank of America	7 Amount of pledge (\$) \$2,500.00	In-kind description (if applicable)
	Corporation / Labor Organization address; City; State; Zip Code 200 Concord Plaza, 10th floor San Antonio, TX 78216	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Date 10/19/2017	Corporation / Labor Organization Name Drolette Construction	7 Amount of pledge (\$) \$1,000.00	In-kind description (if applicable)
	Corporation / Labor Organization address; City; State; Zip Code 341 Courtnee's Way Georgetown, TX 78626	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Date 10/23/2017	Corporation / Labor Organization Name Flynn Construction	7 Amount of pledge (\$) \$1,000.00	In-kind description (if applicable)
	Corporation / Labor Organization address; City; State; Zip Code 4638 S. Lamar Blvd. Austin, TX 78745	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Date 10/13/2017	Corporation / Labor Organization Name International Bancshares Corp.	7 Amount of pledge (\$) \$5,000.00	In-kind description (if applicable)
	Corporation / Labor Organization address; City; State; Zip Code 1200 San Bernardo Laredo, TX 78041	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Date 10/24/2017	Corporation / Labor Organization Name LTZ Architects	7 Amount of pledge (\$) \$2,500.00	In-kind description (if applicable)
	Corporation / Labor Organization address; City; State; Zip Code 304 E. Main St. Round Rock, TX 78664	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	

PLEGGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE D

The Instruction Guide explains how to complete this form.		1 Total pages Schedule D: Sch: 2/2 Rpt: 20/29	
2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923	
4 Date 10/20/2017	5 Corporation / Labor Organization Name Texas Gas	7 Amount of pledge (\$) \$5,000.00	8 In-kind description (if applicable)
	6 Corporation / Labor Organization address; City; State; Zip Code 1301 South Mopac Expressway, Suite 400 Austin, TX 79746		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			

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: 1/9 Rpt: 21/29		2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923	
4 Date 10/13/2017		5 Payee name Austin Chronicle			
6 Amount (\$) \$4,635.00		7 Payee address; City; State; Zip Code PO Box 4189 Austin, TX 78765			
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 Print political advertising	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/19/2017		Payee name Butts, David			
Amount (\$) \$5,000.00		Payee address; City; State; Zip Code 1914 Patton Ln 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 General consulting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/12/2017		Payee name Central Market			
Amount (\$) \$19.99		Payee address; City; State; Zip Code 4001 N. Lamar Blvd. Austin, TX 78756			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 food for meeting	
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/9 Rpt: 22/29		2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923	
4 Date 10/27/2017		5 Payee name DSPolitical			
6 Amount (\$) \$15,000.00		7 Payee address; City; State; Zip Code 1250 H Street, NW Suite 200 Washington, DC 20005			
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 political advertising	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/28/2017		Payee name DonateWay			
Amount (\$) \$524.12		Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense merchant account processing fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/27/2017		Payee name Headliners Club			
Amount (\$) \$2,101.37		Payee address; City; State; Zip Code 221 West 6th St., Ste. 2100 Austin, TX 78701			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 Food & venue costs for event	
Complete ONLY 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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/9 Rpt: 23/29		2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923	
4 Date 10/03/2017		5 Payee name Hernandez, Laura			
6 Amount (\$) \$4,000.00		7 Payee address; City; State; Zip Code 2408 Manor Road #108 Austin, TX 78722			
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 Fundraising consulting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/19/2017		Payee name KAZI			
Amount (\$) \$2,000.00		Payee address; City; State; Zip Code 8906 Wall St # 203 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 Radio political advertising	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/29/2017		Payee name Littlefield Consulting			
Amount (\$) \$4,000.00		Payee address; City; State; Zip Code PO Box 90591 Austin, TX 78709			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense loan repayment	
Complete ONLY 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/9 Rpt: 24/29		2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923	
4 Date 10/13/2017		5 Payee name Mi Madre's			
6 Amount (\$) \$47.41		7 Payee address; City; State; Zip Code 2201 Manor Rd Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 food for meeting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/13/2017		Payee name Opinion Analysts			
Amount (\$) \$15,000.00		Payee address; City; State; Zip Code 400 West 14th St. # 220 Austin, TX 78701			
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 Survey	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/24/2017		Payee name Rindy Miller Media			
Amount (\$) \$57,000.00		Payee address; City; State; Zip Code 2401 E 6th St. Austin, TX 78702			
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 Design, printing & mailing services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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: 5/9 Rpt: 25/29	2 FILER NAME Committee for Austin's Children	3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/12/2017	5 Payee name Rindy Miller Media	
6 Amount (\$) \$60,000.00	7 Payee address; City; State; Zip Code 2401 E 6th St. Austin, TX 78702	
8 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 Design, printing & mailing services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/16/2017	Payee name Starbucks	
Amount (\$) \$34.53	Payee address; City; State; Zip Code 1201 Barbara Jordan Blvd Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 coffee for meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2017	Payee name Susan Harry Consulting	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code P.O. Box 301074 Austin, TX 78703	
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 Fundraising & compliance consulting
Complete ONLY 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)

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|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/9 Rpt: 26/29	2 FILER NAME Committee for Austin's Children	3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/08/2017	5 Payee name Texas Secretary of State	
6 Amount (\$) \$2.05	7 Payee address; City; State; Zip Code 1019 Brazos St. Austin, TX 78701	
8 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 compliance research
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 10/03/2017	Payee name Texas Secretary of State	
Amount (\$) \$9.24	Payee address; City; State; Zip Code 1019 Brazos St. Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense compliance research
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 10/03/2017	Payee name Texas Secretary of State	
Amount (\$) \$16.43	Payee address; City; State; Zip Code 1019 Brazos St. Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense compliance research
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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/9 Rpt: 27/29	2 FILER NAME Committee for Austin's Children	3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/20/2017	5 Payee name The Villager	
6 Amount (\$) \$2,016.00	7 Payee address; City; State; Zip Code 4132 E 12th St. Austin, TX 78721	
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 Print political advertising
9 Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 10/16/2017	Payee name Y Strategy	
Amount (\$) \$3,990.73	Payee address; City; State; Zip Code 3110 Manor Rd. Ste. H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Field services
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 10/16/2017	Payee name Y Strategy	
Amount (\$) \$4,854.85	Payee address; City; State; Zip Code 3110 Manor Rd. Ste. H Austin, TX 78723	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) 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 Phone calls
Complete ONLY 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: 8/9 Rpt: 28/29		2 FILER NAME Committee for Austin's Children		3 Filer ID (Ethics Commission Filers) 00081923	
4 Date 10/02/2017		5 Payee name Y Strategy			
6 Amount (\$) \$5,000.00		7 Payee address; City; State; Zip Code 3110 Manor Rd. Ste. H Austin, TX 78723			
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 Campaign management	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/02/2017		Payee name Y Strategy			
Amount (\$) \$3,500.00		Payee address; City; State; Zip Code 3110 Manor Rd. Ste. H Austin, TX 78723			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Field management	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/02/2017		Payee name Y Strategy			
Amount (\$) \$6,017.25		Payee address; City; State; Zip Code 3110 Manor Rd. Ste. H Austin, TX 78723			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 Field services	
Complete ONLY 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/9 Rpt: 29/29	2 FILER NAME Committee for Austin's Children	3 Filer ID (Ethics Commission Filers) 00081923
4 Date 10/02/2017	5 Payee name Y Strategy	
6 Amount (\$) \$4,025.09	7 Payee address; City; State; Zip Code 3110 Manor Rd. Ste. H Austin, TX 78723	
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 Phone calls
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held