

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 9152	2 Total pages filed: 18
--	---------------------------	----------------------------

3 COMMITTEE NAME Travis Forward	<div style="border: 1px solid black; padding: 2px;"> OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged </div>
------------------------------------	---

4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 301074 Austin, TX 78703
---	---

5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Ted NICKNAME LAST Siff	MI SUFFIX
---------------------------	---	------------------

6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 604 West 11th Austin, TX 78701
---	--

7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 604 West 11th Austin, TX 78701
--	---

8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 657-5414
----------------------------	---

9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 Limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination
---------------	--

10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 10/29/2017 12/31/2017
-------------------	---

11 ELECTION	ELECTION DATE Month Day Year 11/07/2017	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
Travis Forward

13 Filer ID

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 & B	ELECTION DATE Month Day Year 11/07/2017
		DESCRIPTION Support Travis County GO bond propositions	

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)	\$	\$24,950.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	\$0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	\$82,975.16
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	\$233.74
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.

SUSAN HARRY
Notary Public, State of Texas
My Commission Expires
July 23, 2019

Ted Siff

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ted Siff, this the 15th day of January, 2018, to certify which, witness my hand and seal of office.

[Signature]

Signature of officer administering oath

Susan Harry

Printed name of officer administering oath

Notary

Title of officer administering oath

SUBTOTALS - SPAC

17 COMMITTEE NAME Travis Forward	18 Filer ID
-------------------------------------	-------------

19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 22,150.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 2,500.00
5. <input checked="" type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 300.00
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	\$ 82,975.16
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: 1/4 Rpt: 4/18
2 FILER NAME Travis Forward		3 Filer ID
4 Date 11/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alsup, James	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 2610 Saint Anthony St. Austin, TX 78703		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/31/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Board of Realtors PAC	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code 4106 Medical Parkway Austin, TX 78756		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bracewell PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 711 Lousiana St. Ste. 2300 Houston, TX 77002		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Wade	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 100 Congress Ave # 1100 Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dow, Matt	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6109 Shadow Mountain 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: 2/4 Rpt: 5/18
2 FILER NAME Travis Forward		3 Filer ID
4 Date 11/03/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Education Austin PAC	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 316 West 12th St. Ste. 202 Austin, TX 78701		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hildebrand, Lisa	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2003 Trevino Dr. Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Husch Blackwell LLP	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code 190 Carondelet Plaza Ste. 600 St. Louis, MO 63105		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janes, Brandon	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 901 Forest View Dr. West Lake Hills, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/03/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaureghi, Luis	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 3660 Stoneridge Rd. #A 102 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: 3/4 Rpt: 6/18
2 FILER NAME Travis Forward		3 Filer ID
4 Date 11/02/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) M & S Engineering LLC PAC <hr/> 6 Contributor address; City; State; Zip Code PO Box 970 Spring Branch, TX 78070	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/18/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manchester, Douglas <hr/> Contributor address; City; State; Zip Code 3411 Bonnie Rd. Austin, TX 78703	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nias, James <hr/> Contributor address; City; State; Zip Code 1116 Reagan Terrace Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owens, Gregg <hr/> Contributor address; City; State; Zip Code 14710 Crosscreek Austin, TX 78737	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/27/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RECA-Business M/PAC <hr/> Contributor address; City; State; Zip Code 98 San Jacinto Blvd. Ste. 510 Austin, TX 78701	Amount of Contribution (\$) \$1,500.00
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: 4/4 Rpt: 7/18
2 FILER NAME Travis Forward		3 Filer ID
4 Date 11/20/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheryl Cole & Associates LLC	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 4101 Wildwood Rd. Austin, TX 78722		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strickland, Wesley	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4902 Sapling Cove Austin, TX 78735		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/01/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOTE PAC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 3571 Far West Blvd. PMB 149 Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webberman, Gerald	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 7809 Harvestman Cove Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weynand, Mike	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 100 Congress Ave # 1100 Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule C1: Sch: 1/1 Rpt: 8/18</p>
<p>2 FILER NAME Travis Forward</p>		<p>3 Filer ID</p>
<p>4 Date 11/07/2017</p>	<p>5 Corporation / Labor Organization name Energy Engineering Associates, Inc.</p> <hr/> <p>6 Corporation / Labor Organization address; City; State; Zip Code 6615 Vaught Ranch Rd. Ste. 100 Austin, TX 78730</p>	<p>7 Amount of contribution (\$) \$1,000.00</p>
<p>Date 11/07/2017</p>	<p>Corporation / Labor Organization name HVJ South Central Texas - M & J, Inc.</p> <hr/> <p>Corporation / Labor Organization address; City; State; Zip Code 4201 Freidrich Lane Ste. 110 Austin, TX 78744</p>	<p>Amount of contribution (\$) \$500.00</p>
<p>Date 11/27/2017</p>	<p>Corporation / Labor Organization name Lockwood, Andrews & Newnam, Inc.</p> <hr/> <p>Corporation / Labor Organization address; City; State; Zip Code 8911 N Capital of Texas Hwy Austin, TX 78759</p>	<p>Amount of contribution (\$) \$1,000.00</p>

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule C2:
Sch: 1/1 Rpt: 9/18

2 FILER NAME
Travis Forward

3 Filer ID

4 Date
10/31/2017

5 Corporation / Labor Organization name
ACEC Central Texas

6 Corporation / Labor Organization address; City; State; Zip Code
1001 Congress Ave., Suite 200

Austin, TX 78701

7 Amount of contribution(\$)
\$300.00

8 In-kind contribution description
food & drinks for event

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: 10/18	2 FILER NAME Travis Forward	3 Filer ID
--	---------------------------------------	-------------------

4 Date 11/17/2017	5 Payee name 823 Congress
-----------------------------	-------------------------------------

6 Amount (\$) \$15.00	7 Payee address; City; State; Zip Code 823 Congress Ave. Austin, TX 78701
---------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense parking
---------------------------------	--	--

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 11/08/2017	Payee name Agnelis, Susan
--------------------	------------------------------

Amount (\$) \$105.00	Payee address; City; State; Zip Code 4825 Davis Lane #1913 Austin, TX 78749
-------------------------	--

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 contract services
------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 12/31/2017	Payee name DonateWay
--------------------	-------------------------

Amount (\$) \$63.10	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 processor fees
------------------------	--	--

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: 2/9 Rpt: 11/18	2 FILER NAME Travis Forward	3 Filer ID
4 Date 12/20/2017	5 Payee name Farb, Loretta	
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 206 W. Covington Dr. Austin, TX 78753	
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 General consulting
9 Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 11/30/2017	Payee name Frost Bank	
Amount (\$) \$8.00	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) 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 bank fee
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 12/29/2017	Payee name Frost Bank	
Amount (\$) \$8.00	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) 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 bank fee
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: 3/9 Rpt: 12/18		2 FILER NAME Travis Forward		3 Filer ID	
4 Date 11/06/2017		5 Payee name Gilliam, Tom			
6 Amount (\$) \$3,500.00		7 Payee address; City; State; Zip Code 4825 Davis Lane #1913 Austin, TX 78749			
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 contract services	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/20/2017		Payee name Hahn Public			
Amount (\$) \$5,000.00		Payee address; City; State; Zip Code 4200 Marathon Blvd #300 Austin, TX 78756			
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 Communications consulting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/22/2017		Payee name Hahn Public			
Amount (\$) \$12,185.16		Payee address; City; State; Zip Code 4200 Marathon Blvd #300 Austin, TX 78756			
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 Communications consulting & lunch expenses	
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: 4/9 Rpt: 13/18	2 FILER NAME Travis Forward	3 Filer ID
4 Date 11/02/2017	5 Payee name Jeff Crosby Direct Mail	
6 Amount (\$) \$14,827.00	7 Payee address; City; State; Zip Code 505 West 7th St. Unit 108 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 <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 10/30/2017	Payee name Jeff Crosby Direct Mail	
Amount (\$) \$20,448.00	Payee address; City; State; Zip Code 505 West 7th St. Unit 108 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 <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 11/08/2017	Payee name Jones, William	
Amount (\$) \$547.50	Payee address; City; State; Zip Code 512 Elorr Hurt Lane #705 Austin, TX 78745	
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 contract 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: 5/9 Rpt: 14/18	2 FILER NAME Travis Forward	3 Filer ID
4 Date 12/12/2017	5 Payee name La Condesa	
6 Amount (\$) \$457.84	7 Payee address; City; State; Zip Code 400 W 2nd St A Austin, TX 78701	
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 Campaign lunch
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2017	Payee name Lanier Parking	
Amount (\$) \$7.00	Payee address; City; State; Zip Code 111 Congress Ave. Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel in District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense parking
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2017	Payee name Office Depot	
Amount (\$) \$65.99	Payee address; City; State; Zip Code 816 Tirado St Austin, TX 78752	
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 postage and office supplies
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: 6/9 Rpt: 15/18		2 FILER NAME Travis Forward		3 Filer ID	
4 Date 12/04/2017		5 Payee name Postmaster			
6 Amount (\$) \$49.00		7 Payee address; City; State; Zip Code 3507 N Lamar Blvd Austin, TX 78705			
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 postage	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/08/2017		Payee name Prieto, Rene			
Amount (\$) \$547.50		Payee address; City; State; Zip Code PO Box 120 McNeil, TX 78651			
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 contract services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/04/2017		Payee name Susan Harry Consulting			
Amount (\$) \$38.40		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) 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	
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: 7/9 Rpt: 16/18	2 FILER NAME Travis Forward	3 Filer ID
4 Date 11/06/2017	5 Payee name Susan Harry Consulting	
6 Amount (\$) \$9,000.00	7 Payee address; City; State; Zip Code P.O. Box 301074 Austin, TX 78703	
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 & compliance consulting
9 Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 10/31/2017	Payee name Texas Vote Environment PAC	
Amount (\$) \$3,700.00	Payee address; City; State; Zip Code 600 W. 28th Ste. 202 Austin, TX 78705	
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 Marketing and field services
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 11/08/2017	Payee name Tobin, Bridget	
Amount (\$) \$393.75	Payee address; City; State; Zip Code 1402-A Valleyridge Dr. Austin, TX 78704	
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 Field contract 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
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: 17/18	2 FILER NAME Travis Forward	3 Filer ID
4 Date 11/09/2017	5 Payee name Twin Liquors	
6 Amount (\$) \$228.55	7 Payee address; City; State; Zip Code 5716 Burnet Rd Austin, TX 78756	
8 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 beverages for election night party
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2017	Payee name Y Strategy	
Amount (\$) \$1,626.62	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 Telephone calls
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/06/2017	Payee name Y Strategy	
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) 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 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: 9/9 Rpt: 18/18	2 FILER NAME Travis Forward	3 Filer ID
4 Date 11/08/2017	5 Payee name Zouhart, Jesse	
6 Amount (\$) \$153.75	7 Payee address; City; State; Zip Code 6205 Peggy St. 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 contract services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Office held		