



**Pre-Election Report
Political Committees
Form ATX.7PAC**

Office Use Only

AUSTIN CITY CLERK
RECEIVED

2016 JUN 27 PM 3 12

1 Total pages filed:	8	2 Filer Name	Premal Amin
----------------------	---	--------------	-------------

3 COMMITTEE NAME	Committee Name Austin Firefighters PAC		
4 COMMITTEE ADDRESS	Address/ PO Box 7537 Cameron Road	Apartment or Suite Number	
	City Austin	State TX	Zip Code 78752
5 COMMITTEE TREASURER NAME	Title Mr.	First Name Joshua	Middle Initial
	Nickname	Last Name Lake	Suffix
6 COMMITTEE TREASURER ADDRESS AND PHONE	Address/ PO Box 21432 Noack HI	Apartment or Suite Number	
	City Spicewood	State TX	Zip Code 78669
	Phone Number (###-###-####) 512-441-7572	Extension, if applicable	
7 REPORTING PERIOD	Start Date (yyyymmdd) 20160526	THROUGH	End Date (yyyymmdd) 20160625



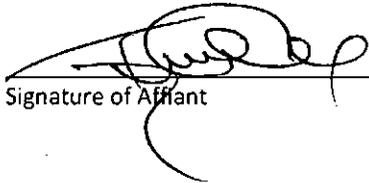
**Pre-Election Report
Political Committees
Form ATX.7PAC**

1 Total pages filed: <input type="text"/>	2 Filer Name <i>David Garcia</i>
---	----------------------------------

8 REPORTS ATTACHED <i>Check box for each form attached</i>	<input type="checkbox"/> ATX.7A - Pre-Election Report of Contributions
	<input checked="" type="checkbox"/> ATX.7F - Pre-Election Report of Expenditures

AFFIDAVIT

By signature below, I certify that the preceding Special Pre-Election Report filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-29 for the reporting period indicated.



Signature of Affiant



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

Itemize each contribution in Sections 1-3. For additional contributions, click "Add Another Contribution Page" below.

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	Organization Name, or Contributor Last Name (if applicable) <input type="text" value="N/A"/>
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box <input type="text"/> Contributor Apartment or Suite Number <input type="text"/> Contributor City <input type="text"/> Contributor State <input type="text"/> Contributor Zip Code <input type="text"/> Contributor Employer <input type="text"/> Contributor Occupation <input type="text"/>
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd) <input type="text"/> (\$) Contribution Amount <input type="text"/> In-Kind Contribution Description, if applicable <input type="text"/>

[Add Another Contribution Page](#)

