FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. 3 COMMITTEE NAME OFFICE USE ONLY **Austinites for Equity** Date Received OCC RECEIVED AT JAN 15'19 PM4:04 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE ADDRESS 1812 Centre Creek Dr Suite 310 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78754 Receipt# Amount Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST М **TREASURER** NAME Jack NICKNAME LAST SUFFIX Kirfman 6 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE # CITY: STATE: ZIP CODE TREASURER STREET 1812 Centre Creek Dr Suite 310 **ADDRESS** Austin, TX 78754 (Residence or Business) STREET OR PO BOX; CAMPAIGN APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1812 Centre Creek Dr Suite 310 MAILING **ADDRESS** Austin, TX 78754 Change of Address CAMPAIGN AREA CODE PHONE NUMBER **EXTENSION TREASURER** 658-4892 (512)PHONE 9 REPORT 30th day before election Exceeded \$500 Limit X January 15 TYPE 8th day before election Dissolution (Attach PAC-DR) July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Month Year Month Day Year Day COVERED THROUGH 12/02/2018 12/31/2018 **ELECTION TYPE** 11 ELECTION **ELECTION DATE** Day Year Primary Runoff Other 11/06/2018 X General Special **GO TO PAGE 2**

FORM SPAC SPECIFIC-PURPOSE COMMITTEE REPORT: **PURPOSE AND TOTALS COVER SHEET PG 2** 12 COMMITTEE NAME 13 Filer ID Austinites for Equity 14 COMMITTEE CANDIDATE / OFFICEHOLDER NAME **PURPOSE** Mariana Sanchez (Attach lists on plain Candidate paper to complete this report if necessary.) Officeholder OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) City Council, District 1 X SUPPORT BALLOT IDENTIFICATION / # **ELECTION DATE** (Candidate or Measure) Month Day Year OPPOSE (Candidate or Measure) Measure **ASSIST** DESCRIPTION (Officeholder) 15 CONTRIBUTION 1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES. **TOTALS** LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$0,00 S 2. TOTAL POLITICAL CONTRIBUTIONS \$11,450,00 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED **TOTALS** \$0.00 4. TOTAL POLITICAL EXPENDITURES \$ \$29,246,79 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE CONTRIBUTION BALANCE REPORTING PERIOD \$ \$804.80 TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST **OUTSTANDING** LOAN TOTALS DAY OF THE REPORTING PERIOD s \$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 5. Security Code. SUSAN HARRY Notary Public, State of Texas My Commission Expires July 23, 2019 Signature of Campaign Treasurer ARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said this the day to certify which, witness my hand and seal of office.

Forms provided by Texas Ethics Commission

Signature of officer administering oath

www.ethics.state.tx.us

Printed name of officer administering oath

Version V1.1.28ab6150

Title of officer administering oath

| SPECIFIC-PUF PURPOSE | RPOSE COMMIT | TEE REPORT: | FORM SPAC ADDENDUM |
|---|------------------|--|---------------------------------|
| | | | Page 3 of 9 |
| 12 COMMITTEE NAME Austinites for Equity | | | 13 Filer ID |
| 14 COMMITTEE PURPOSE | _ | CANDIDATE / OFFICE HOLDER NAME Paige Ellis | |
| (Attach lists on plain paper to complete this report if necessary.) | X CANDIDATE | OFFICE SOUGHT (candidate) / OFFICE HE | ELD (officeholder) |
| X SUPPORT (Candidate or Measure) | OFFICE HOLDER | City Council, District 8 | |
| OPPOSE (Candidate or Measure) | MEASURE | BALLOT IDENTIFICATION | ELECTION DATE MONTH DAY YEAR |
| | | DESCRIPTION | |
| ASSIST (Officeholders only) | | | |
| COMMITTEE | | CANDIDATE / OFFICE HOLDER NAME | |
| PURPOSE (Attach lists on plain paper to complete this | CANDIDATE | The Honorable Sabino Renteria | |
| report if necessary.) | X OFFICE HOLDER | OFFICE SOUGHT (candidate) / OFFICE HE | ELD (officeholder) |
| SUPPORT (Candidate or Measure) | X OFFICE HOLDER | City Council, District 3 | |
| | | BALLOT IDENTIFICATION | ELECTION DATE |
| OPPOSE (Candidate or Measure) | MEASURE | | MONTH DAY YEAR |
| X ASSIST (Officeholders only) | ii. | DESCRIPTION | |
| COMMITTEE | | CANDIDATE / OFFICE HOLDER NAME | |
| PURPOSE (Attach lists on plain paper to complete this | X CANDIDATE | Frank Ward | |
| report if necessary.) | | OFFICE SOUGHT (candidate) / OFFICE HE | ELD (officeholder) |
| SUPPORT (Candidate or Measure) | OFFICE HOLDER | City Council, District 8 | |
| X OPPOSE | | BALLOT IDENTIFICATION | ELECTION DATE MONTH DAY YEAR |
| (Candidate or Measure) | MEASURE | DESCRIPTION | |
| ASSIST (Officeholders only) | | | |
| | | | |
| | | | |
| Forms provided by Texas E | thics Commission | www.ethics.state.tx.us | Version V1.1.28ab615 |

SUBTOTALS - SPAC

FORM SPAC

| | C: | OVER SHEET PG 3 |
|--|-------------|-----------------|
| COMMITTEE NAME | 18 Filer ID | |
| Austinites for Equity | | |
| S SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ 6,450.0 |

| 1 | L. | х | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 6,450.00 |
|---|-----|---|--|--------------|
| 2 | 2. | | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3 | 3. | | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4 | 1, | X | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ 5,000.00 |
| 5 | 5. | | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 6 | 3. | | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 1 | 7. | | SCHEDULE E: LOANS | \$ |
| 8 | в. | х | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 29,246.79 |
| ģ | ∍. | | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| - | 10. | | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | s |

SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/9 2 FILER NAME 3 Filer ID Austinites for Equity X out-of-state PAC (ID#: C00027342 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) 12/20/2018 \$750.00 **IBEW PAC Voluntary Fund** 6 Contributor address; City; State; Zip Code 900 Seventh Street N.W. Washington, DC 20001 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#; 12/10/2018 \$200.00 Kirfman, Jack Contributor address; City; State; Zip Code 15408 Interlachen Drive Austin, TX 78717 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Political Director** AFSCME Date Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) 12/04/2018 \$5,000.00 Natin, Paul Contributor address; City; State; Zip Code 401 Congress Ave. 3rd Floor Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) President World Class Holdings Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) \$500.00 12/07/2018 United Assn of Journeyman & Apprentices of Plumbing & Pipefitting Ind. Contributor address; City; State; Zip Code 814 Airport Blvd. Austin, TX 78702 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V1.1.28ab6150

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

| | The Instru | ction Guide explains how to complete this form. | 1 Total pages Schedule C1: Sch: 1/1 Rpt: 6/9 |
|---|-----------------------------|---|---|
| 2 | FILER NAME Austinites fo | r Equity | 3 Filer ID |
| 4 | Date 12/04/2018 | 5 Corporation / Labor Organization name Stratus Properties 6 Corporation / Labor Organization address; City, State; Zip Code 212 Lavaca St. Ste. 300 Austin, TX 78701 | 7 Amount of contribution (\$) \$5,000.00 |

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

| Contributions/ Donations Ma Candidate/Officeholder/Po Credit Card Payment | |
|---|--|
| 1 Total pages Schedule I | F1: 2 FILER NAME 3 Filer ID |
| Sch: 1/3 Rpt: 7/9 | |
| 4 Date | 5 Payee name |
| 12/06/2018 | Austin Chronicle |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,225. | 00 PO Box 4189 |
| | Austin, TX 78765 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Advertising Expense Check if travel outside of Texas, Complete Schedule T. |
| | Check If Austin, TX, officeholder living expense Political print advertising |
| | i onteal print advertising |
| O Complete Chilly if it | ct Candidate/Officeholder name Office sought Office held |
| 9 Complete <u>ONLY</u> if dire expenditure to benefit | The state of the s |
| • | Sanchez, manana Ony Council, District 1 |
| Date | Payee name |
| | (see previous) |
| Amount (\$) | Payee address; City; State; Zip Code |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| Complete ONLY if dire expenditure to benefit | |
| Date | Payee name |
| | (see previous) |
| Amount (\$) | Payee address; City, State, Zip Code |
| | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. |
| Complete ONLY if dire | |
| expenditure to benefit | |
| | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donatelons Made By Candidate/Officeholder/Political Committee
Cradii Card Bayment

Event Expense Fees Food/Beverage Expense Gltt/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)

| | Credit Card Payment | The Instruction Guide explains how to | compl | ete this form. | | |
|---|---|---|--|--|--|--|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | 3 Filer ID | | |
| | Sch: 2/3 Rpt: 8/9 | Austinites for Equity | | | | |
| 4 | Date | 5 Payee name | | | | |
| | 12/10/2018 | BLIZCO Productions | | | | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip (| Code | | | |
| | \$3,750.00 | 2100 Southern Oaks Dr. | | | | |
| | | | | | | |
| | | Austin, TX 78745 | | | | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) | Description | | |
| | OF EXPENDITURE | Advertising Expense | 1 | Check it travel outside of Texas. Complete Schedule T | | |
| | | 8 | | Check if Austin, TX, officeholder living expense Video production | | |
| | | | | video production | | |
| 9 | Complete ONLY if direct | Candidate/Officeholder name Office s | l Duaht | Office held | | |
| Ĭ | expenditure to benefit C/O | | | | | |
| | Date | Payee name | | | | |
| | 12/07/2018 | City Lights Group | | | | |
| _ | Amount (\$) | Payee address; City; State; Zip (| Code | | | |
| | \$4,500.00 | 1605 Kerr St. | 5040 | | | |
| | 0-1,000.00 | 1555 ((6)) 51. | | | | |
| | | Austin, TX 78704 | | | | |
| _ | | | 1/63 | | | |
| | PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) Advertising Expanse | | | | |
| | EXPENDITURE | Advertising Expense | Check if Austin, TX, officeholder living expense | | | |
| | | Digital advertising | | | | |
| | | | | | | |
| | Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held | | | | |
| | experiustore to beneat C/OI | 1 | | | | |
| | Date | Payee name | | | | |
| | 12/04/2018 | Clean Water Action | | | | |
| | Amount (\$) | Payee address; City; State; Zip | Code | | | |
| | \$2,000.00 | 600 W. 28th St. | | | | |
| | | | | | | |
| | | Austin, TX 78705 | | | | |
| _ | PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) | Description | | |
| | OF EXPENDITURE | Contributions/Donations Made By | | Check if travel outside of Texas. Complete Schedule T. | | |
| | EXPENDITORE | Candidate/Officeholder/Political Committee | | Check if Austin, TX, officeholder living expense | | |
| | | | | Political contribution | | |
| | Complete ONLY if direct | Candidate/Officeholder name Office s | Oltobi | Office held | | |
| | expenditure to benefit C/O | | _ | l, District 1 | | |
| | <u></u> . | July Ott | | , | | |
| | | | | | | |
| | | | | | | |

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Pollind Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District

| | Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment | | Gift/Awards/Memoria Legal Services The Instruction | ils Expense | | enso ages/ | e /Contract Labor | Travel Out of District OTHER (enter a category not listed a | bove) |
|---|---|-----------------|---|------------------------|-------------|---------------|----------------------|---|----------|
| 1 | Total pages Schedule F1: | 2 FILER NAME | | | | | ·- | 3 Filer ID | |
| | Sch: 3/3 Rpt: 9/9 | Austinites f | or Equity | | | | | | |
| 4 | Date | 5 Payee name | | | | | | | |
| | 12/04/2018 | Clean Wate | er Action | | | | | | |
| 6 | Amount (\$) | 7 Payee addre | ss; City; | State; | Zip Coo | le | 80 | | |
| | \$1,000.00 | 600 W. 28t | 1 St. | | | | | | |
| | | | | | | | | | |
| | | Austin, TX | 78705 | | | | | | |
| 8 | PURPOSE | (a) Category (S | ee Categories listed a | t the top of this sch | edule) | (b) | Description | | |
| | OF EXPENDITURE | Contribution | ns/Donations N | /lade By | | | _ | outside of Texas. Complete Schedule T. | |
| | | Candidate/ | Officeholder/Po | olitical Comm | nittee | | | TX, officeholder living expense | |
| | | | | | | | Political contr | Ibution | |
| | | | 16 A A : | | | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OF | | iceholder name | | Office soug | 1477 | District 0 | Office held | |
| | experience to benefit crof | Ellis, Paige | | | City Coun | CII, | District 8 | | |
| | Date | Payee name | | | | | | | |
| | 12/07/2018 | GNI Consu | lting | | | | | | |
| | Amount (\$) | Payee addre | ss; City; | State | ; Zip Coo | de | | | |
| | \$2,150.00 | PO Box 685008 | | | | | | | |
| | | | | | | | | | |
| | | Austin, TX | 78768 | | | | | | |
| | PURPOSE | (a) Category (s | ee Categories listed a | at the top of this sch | nedule) | (b) | Description | | |
| | OF EXPENDITURE | Advertising | | | 8 1000 | | | outside of Texas, Complete Schedule T. | |
| | | | | | | | Digital advert | , TX, officeholder living expense | |
| | | | | | | | Digital auvert | ising | |
| | Complete ONLY if direct | | iceholder name | (| Office soug | ght | | Office held | |
| | expenditure to benefit C/OF | 1 | | | | | | | |
| | Date | Payee name | 9 | | | | | | |
| | 12/10/2018 | Kelly Grapi | nics | | | | | | |
| | Amount (\$) | Payee addre | ss; City; | State | Zip Co | de | | | |
| | \$14,621.79 | 1409 Quak | er Ridge | | | | | | |
| | | | | | | | | | |
| | | Austin, TX | 78746 | | | | | | |
| _ | PURPOSE | (a) Category (s | iee Categories listed a | at the top of this sch | nedule) | (b) | Description | | |
| | OF EXPENDITURE | Advertising | | | 322 15 | | | outside of Texas. Complete Schedule T. | |
| | EXPENDITORE | | | | | | | TX, officeholder living expense | |
| | | | | | | | Printing, mail | ing and postage | |
| | Complete ONLY if direct | Candidate/Of | iceholder name | | Office sou | the | | Office held | |
| | expenditure to benefit C/O | | | | _ | | District 1 | | |
| _ | | | | ` | , | | | | <u>.</u> |
| | | | | | | | | | |
| | | | | | | | | | |