

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090449		2 Total pages filed: 8	
3 COMMITTEE NAME Austinites for Equity				OFFICE USE ONLY Date Received ELECTRONICALLY FILED 12/07/2020 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1812 Centre Creek Dr Suite 310 Austin, TX 78754			
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Jack NICKNAME LAST SUFFIX Kirfman			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1812 Centre Creek Dr Suite 310 Austin, TX 78754			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1812 Centre Creek Dr Suite 310 Austin, TX 78754			
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (512) 658-4892			
9 REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 Limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED		Month Day Year Month Day Year 10/25/2020 THROUGH 12/05/2020			
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other 12/15/2020 <input type="checkbox"/> General <input type="checkbox"/> Special			

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SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **SPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Austinites for Equity		13 Filer ID (Ethics Commission Filers) 00090449	
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input checked="" type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME The Honorable Jimmy Flannigan	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Council Member, District 6	
	<input type="checkbox"/> Measure	BALLOT IDENTIFICATION / # <div style="float: right;"> ELECTION DATE Month Day Year </div>	
		DESCRIPTION	
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
<div style="border-top: 1px dashed black; padding-top: 5px;">EXPENDITURE TOTALS</div>	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 33,650.00
<div style="border-top: 1px dashed black; padding-top: 5px;">CONTRIBUTION BALANCE</div>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.00
<div style="border-top: 1px dashed black; padding-top: 5px;">OUTSTANDING LOAN TOTALS</div>	4. TOTAL POLITICAL EXPENDITURES		\$ 35,685.65
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 37,983.08	
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.		
AFFIX NOTARY STAMP / SEAL ABOVE		<div style="margin-bottom: 5px;"> <u>Jack Kirfman</u> </div> Signature of Campaign Treasurer
Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.		
_____ Signature of officer administering oath	_____ Printed name of officer administering oath	_____ Title of officer administering oath

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE

FORM SPAC
ADDENDUM

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12 COMMITTEE NAME Austinites for Equity		13 Filer ID (Ethics Commission Filers) 00090449
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input checked="" type="checkbox"/> ASSIST (Officeholders only)	<input type="checkbox"/> CANDIDATE	CANDIDATE / OFFICE HOLDER NAME The Honorable Alison Alter
	<input checked="" type="checkbox"/> OFFICE HOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Council Member, District 10
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION ELECTION DATE MONTH DAY YEAR DESCRIPTION

SUBTOTALS - SPAC**FORM SPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Austinites for Equity		18 Filer ID 00090449	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	26,150.00
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	\$	7,500.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	35,685.65
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: 1/1 Rpt: 5/8
2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers) 00090449
4 Date 11/23/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adler, Stephen <hr/> 6 Contributor address; City; State; Zip Code 210 Lavaca St Apt 2605 Austin, TX 78701	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions) Mayor		9 Employer (See Instructions) City of Austin
Date 11/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casar, Gregorio <hr/> Contributor address; City; State; Zip Code 300 W Skyview Rd Austin, TX 78752	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Council Member		Employer (See Instructions) City of Austin
Date 11/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coon, Jonathan <hr/> Contributor address; City; State; Zip Code 3939 Bee Caves Road C100 Austin, TX 78746	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Impossible Ventures
Date 11/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Jose <hr/> Contributor address; City; State; Zip Code 6913 Rufus Dr. Austin, TX 78752	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Workers Defense Fund
Date 11/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Daniel <hr/> Contributor address; City; State; Zip Code 1023 Springdale Rd. Ste. 1J Austin, TX 78721	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Notley Ventures

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE **C1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule C1:
Sch: 1/1 Rpt: 6/8

2 FILER NAME
Austinites for Equity

3 Filer ID (Ethics Commission Filers)
00090449

4 Date
11/23/2020

5 Corporation / Labor Organization name
AFSCME Local 1624

7 Amount of contribution (\$)
\$7,500.00

6 Corporation / Labor Organization address; City; State; Zip Code
1812 Centre Creek Dr Suite 310

Austin, TX 78754

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: 1/2 Rpt: 7/8	2 FILER NAME Austinites for Equity	3 Filer ID (Ethics Commission Filers) 00090449
4 Date 10/28/2020	5 Payee name City Lights Group	
6 Amount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 1105 Garner Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital advertising
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Flannigan, Jimmy (The Honorable)	Office sought Council Member, District 6 Office held Council Member, District 6
Date 12/03/2020	Payee name Kelly Graphics	
Amount (\$) \$25,174.68	Payee address; City; State; Zip Code 1812 Centre Creek Dr Suite 310 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 Direct mail
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Flannigan, Jimmy (The Honorable)	Office sought Council Member, District 6 Office held Council Member, District 6
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Alter, Alison (The Honorable)	Office sought Council Member, District 10 Office held Council Member, District 10

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: 2/2 Rpt: 8/8	2 FILER NAME Austinites for Equity	3 Filer ID (Ethics Commission Filers) 00090449
4 Date 12/03/2020	5 Payee name MAP	
6 Amount (\$) \$3,750.22	7 Payee address; City; State; Zip Code 2400 S. 4th St. Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Direct mail
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Flannigan, Jimmy (The Honorable)	Office sought Council Member, District 6 Office held Council Member, District 6
Date 12/03/2020	Payee name MAP	
Amount (\$) \$4,000.90	Payee address; City; State; Zip Code 2400 S. 4th St. Austin, TX 78704	
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 Direct mail
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Alter, Alison (The Honorable)	Office sought Council Member, District 10 Office held Council Member, District 10
Date 11/24/2020	Payee name Paypal	
Amount (\$) \$759.85	Payee address; City; State; Zip Code 2211 N. 1st St. San Jose, CA 95131	
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 online contribution processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held