#### 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. (Ethics Commission Filers) 00090479 3 COMMITTEE NAME **OFFICE USE ONLY** Austin Citizens for Truthful Petitions Date Received **ELECTRONICALLY FILED** 07/15/2021 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1507 W. 6th St. Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78703 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Pinnelli NAME NICKNAME LAST **SUFFIX** Janis STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1507 W. 6th St. STREET **ADDRESS** (Residence or Business) Austin, TX 78703 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS** TX Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 478-7816 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election X July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Month Year Month Day Year Day COVERED 01/01/2021 **THROUGH** 06/30/2021 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Other Primary Runoff General Special **GO TO PAGE 2**

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

# FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Con	nmission Filers)
Austin Citizens for Truth	nful Petitions		00090479		
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME			
(Attach lists on plain paper to complete this report if necessary.)	Candidate	LD (officeholder)			
roportin nooccoury,	Officeholder				
SUPPORT		FLECTI	ION DATE		
(Candidate or Measure)  OPPOSE		BALLOT IDENTIFICATION / #	Month	Day	Year
(Candidate or Measure)	_				
ASSIST (Officeholder)	Measure Measure	DESCRIPTION			
<b>15</b> CONTRIBUTION TOTALS		TRIBUTIONS OF \$50 OR LESS (OTHER THA	N PLEDGES,	\$	\$0.00
	2. TOTAL POLITICAL C			\$	\$0.00
	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)				
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED			\$	\$0.00
4. TOTAL POLITICAL EXPENDITURES					\$504.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CON REPORTING PERIOD	\$	\$675.25		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN	DUNT OF ALL OUTSTANDING LOANS AS OF NG PERIOD	THE LAST	\$	\$0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of pe and correct and includes all information Title 15, Election Code.			
			elli Janis		
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Ca	ampaign Treasur	er	
Sworn to and subscribed before me, by the said, this the			this the		day
of	, 20, to certify whic	h, witness my hand and seal of office.			
Signature of officer ad	ministering oath Prin	ited name of officer administering oath	Title of office	er administe	ring oath

### **SUBTOTALS - SPAC**

## FORM SPAC COVER SHEET PG 3

			3 of 6
17 COMMITTE Austin Cit	EE NAME zens for Truthful Petitions	<b>18</b> Filer ID 00090479	(Ethics Commission Filers)
19 SCHEDUL NAME OF	SUBTOTAL AMOUNT		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	TION OR	\$
6.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O	ORGANIZATION	\$
7.	SCHEDULE E: LOANS		\$
8. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 504.00
9.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
10.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
11.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
12.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$
13.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
14.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

### 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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 1/3 Rpt: 4/6	Austin Citizens for Truthful Petitions 00090479					
4	Date	5 Payee name					
	01/19/2021	City Lights Group					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$250.00	1109 Garner					
		Austin, TX 78704					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  Graphic Design					
		Graphic Design					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
ľ	Complete ONLY if direct expenditure to benefit C/Ol						
┡							
	Date	Payee name					
	01/29/2021	Frost Bank					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$9.00	111 W Houston St.					
		Suite 100					
		San Antonio, TX 78205					
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.					
	EXI ENDITORE	Check if Austin, TX, officeholder living expense					
		Bank Fee					
┡	Complete ONLY if direct	inset Condidate/Officeholder name Office Seath					
	expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held  H					
⊨	5.						
	Date	Payee name					
	02/26/2021	Frost Bank					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$9.00	\$9.00 111 W Houston St.					
	Suite 100						
		San Antonio, TX 78205					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense					
1		Bank Fee					
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	Complete ONLY if direct expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·					
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### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_			
_	Sch: 2/3 Rpt: 5/6	Austin Citizens for Truthful Petitions  O0090479				
4	Date	5 Payee name				
	03/31/2021	Frost Bank				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$9.00	111 W Houston St.				
		Suite 100				
		San Antonio, TX 78205				
8	PURPOSE		_			
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Bank Fee				
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
	Date	Payee name	_			
	04/30/2021	Frost Bank				
	Amount (\$)	Payee address; City; State; Zip Code	_			
	\$9.00	111 W Houston St.				
	40.00	Suite 100				
		San Antonio, TX 78205				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense  Bank Fee				
	Dalik Fee					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O	H				
	Date	Payee name				
	05/31/2021	Frost Bank				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$9.00	111 W Houston St.				
		Suite 100				
		San Antonio, TX 78205				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_			
	OF	Accounting/Banking    Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE	Check if Austin, TX, officeholder living expense				
		Bank Fee				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	H				
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### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Gift/Awards/Memorials E. Legal Services The Instruction Guid		Wage	s/Contract Labor					
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1	Total pages Schedule F1:	2			. 111			ı	Filer ID	(Ethics Commission Filers)
	Sch: 3/3 Rpt: 6/6		Austin Citize	ns for Truthful P	etitions				00090479	
4	Date	5	Payee name							
	06/30/2021		Frost Bank							
6	Amount (\$)	7	Payee addres	s; City;	State; Zip C	ode				
	\$9.00		111 W Hous		•					
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Suite 100							
				TV 7000F						
		L	San Antonio	, IX 78205						
8	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this schedule)	(b)	Description			
	OF EXPENDITURE		Accounting/I	Banking			_			nplete Schedule T.
							Bank Fee	, IX,	officeholder livin	g expense
							Dank Fee			
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	Office so	ught			Office h	eld
	experience to benefit of or									
	Date		Payee name							
	01/19/2021		GNI Consult	ing						
	Amount (\$)		Payee addres	s; City;	State; Zip C	ode				
	\$200.00		P.O. Box 68	5008						
			Austin TV 7	0760						
		<u> </u>	Austin, TX 7							
	PURPOSE OF	(a)		e Categories listed at the	top of this schedule)	(b)	Description			
EXPENDITURE			Consulting E	Expense					de of Texas. Con officeholder livin	nplete Schedule T.
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_	Complete ONLY if direct	<u> </u>	Candidate/Offic	eholder name	Office so	uaht			Office h	ald.
	expenditure to benefit C/OI		zandidate/Onic	enoluei name	Office 30	ugnt			Office fi	Giù
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