



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

☐ Office Use Only

OCC RECEIVED AT
OCT 17 '18 PM3:32

1 INDIVIDUAL OR ORGANIZATION NAME <input type="checkbox"/> Filer is an individual	Committee or Organization Name* <div>Austin Firefighters Public Safety Fund</div>														
2 INDIVIDUAL OR ORGANIZATION ADDRESS	Address/ PO Box* <div>7537 Cameron Road</div> City* <div>Austin</div>		Apartment or Suite Number <div></div> State* <div>TX</div> Zip Code* <div>78752</div>												
3 COMMITTEE TREASURER NAME (if applicable)	<table><tr><td>Title</td><td>First Name</td><td>Middle Initial</td></tr><tr><td></td><td>Gregory</td><td></td></tr><tr><td>Last Name</td><td colspan="2">Suffix</td></tr><tr><td>Pope</td><td colspan="2"></td></tr></table>			Title	First Name	Middle Initial		Gregory		Last Name	Suffix		Pope		
Title	First Name	Middle Initial													
	Gregory														
Last Name	Suffix														
Pope															
4 COMMITTEE TREASURER ADDRESS (if applicable)	Address/ PO Box <div>162 Paintbrush Trail</div> City <div>Lockhart</div>		Apartment or Suite Number <div></div> State <div>TX</div> Zip Code <div>78644</div>												
5 REPORT DATE	Date Filed (yyyymmdd)* <div>20181017</div>														

* Indicates a required field



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

6 AFFIDAVIT

I swear or affirm upon penalty of perjury that each direct campaign expenditure was made without prior consent, cooperation, strategic communication, consultation, or sharing of material information regarding the communication's content, intended audience, timing, or method of dissemination between an affected candidate, the candidate's campaign staff, the candidate's campaign committee, or an agent or employee of the candidate or the committee, and the person making the expenditure, or that person's agent or employee.

I further swear that this Report of Direct Campaign Expenditures 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 2-2-32.

DATE: OCTOBER 17, 2018

[Signature]

AFFIANT'S SIGNATURE

TIMOTHY OLSON

PRINT NAME

STATE OF TEXAS

COUNTY OF TRAVIS

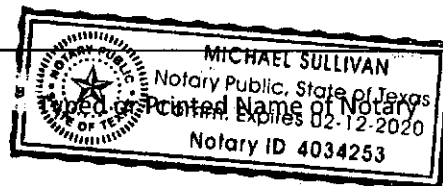
This instrument was acknowledged, sworn to and subscribed before me by

Timothy Olson, Administrator

On the 17 day of OCTOBER, 2018, to certify which witness my hand and official seal.

M. Sullivan

Notary Public in and for the State of Texas





Itemize each direct campaign expenditure in Sections 1-4.
For additional expenditures, click "Add Another Expenditure Page" below.

[illegible]

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

For additional expenditures, click "Add Another Expenditure Page" below.

1 PAYEE NAME <input type="checkbox"/> Payee is an individual	Organization Name or Payee Last Name, as applicable * <div style="border: 1px solid black; padding: 2px;">Azul Strategies</div>		
2 PAYEE ADDRESS	Payee Address/ PO Box * <div style="border: 1px solid black; padding: 2px;">2022 Ford Street</div> Payee City * <div style="border: 1px solid black; padding: 2px;">Austin</div>		Payee Apartment or Suite Number <div style="border: 1px solid black; padding: 2px;"></div> Payee State * <div style="border: 1px solid black; padding: 2px;">TX</div> Payee Zip Code * <div style="border: 1px solid black; padding: 2px;">78704</div>
3 EXPENDITURE DETAILS	Category * <div style="border: 1px solid black; padding: 2px;">Printing Expense</div> Description (If Category is "Other") <div style="border: 1px solid black; padding: 2px;"></div>		(\$) Expenditure Amount * <div style="border: 1px solid black; padding: 2px;">\$1,220.00</div> Expenditure Date * <div style="border: 1px solid black; padding: 2px;">20180921</div>

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

For additional expenditures, click "Add Another Expenditure Page" below.

1	PAYEE NAME <input type="checkbox"/> Payee is an individual	Organization Name or Payee Last Name, as applicable* Azul Strategies		
2	PAYEE ADDRESS	Payee Address/ PO Box* 2022 Ford Street	Payee Apartment or Suite Number	
		Payee City* Austin	Payee State* TX	Payee Zip Code* 78704
3	EXPENDITURE DETAILS	Category* Printing Expense	(\$) Expenditure Amount* \$1,220.00	
		Description (If Category is "Other")	Expenditure Date* 20180921	

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Renteria	Sabino	City Council District 3	City Council District 3

Itemize each direct campaign expenditure in Sections 1-4.

For additional expenditures, click "Add Another Expenditure Page" below.

1 PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	<table border="1"> <tr> <td>Payee Title</td> <td colspan="3">Payee First Name*</td> </tr> <tr> <td></td> <td colspan="3">Delwin</td> </tr> <tr> <td colspan="2">Organization Name or Payee Last Name, as applicable*</td> <td colspan="2">Payee Suffix</td> </tr> <tr> <td colspan="2">Goss</td> <td colspan="2"></td> </tr> </table>	Payee Title	Payee First Name*				Delwin			Organization Name or Payee Last Name, as applicable*		Payee Suffix		Goss			
Payee Title	Payee First Name*																
	Delwin																
Organization Name or Payee Last Name, as applicable*		Payee Suffix															
Goss																	
2 PAYEE ADDRESS	<table border="1"> <tr> <td colspan="2">Payee Address/ PO Box*</td> <td colspan="2">Payee Apartment or Suite Number</td> </tr> <tr> <td colspan="2">6410 Ponca Street</td> <td colspan="2"></td> </tr> <tr> <td>Payee City*</td> <td>Payee State*</td> <td colspan="2">Payee Zip Code*</td> </tr> <tr> <td>Austin</td> <td>TX</td> <td colspan="2">78741</td> </tr> </table>	Payee Address/ PO Box*		Payee Apartment or Suite Number		6410 Ponca Street				Payee City*	Payee State*	Payee Zip Code*		Austin	TX	78741	
Payee Address/ PO Box*		Payee Apartment or Suite Number															
6410 Ponca Street																	
Payee City*	Payee State*	Payee Zip Code*															
Austin	TX	78741															
3 EXPENDITURE DETAILS	<table border="1"> <tr> <td>Category*</td> <td>(\$) Expenditure Amount*</td> </tr> <tr> <td>Salaries/Wages/Contract labor</td> <td>\$1,125.00</td> </tr> <tr> <td>Description (If Category is "Other")</td> <td>Expenditure Date*</td> </tr> <tr> <td></td> <td>20181016</td> </tr> </table>	Category*	(\$) Expenditure Amount*	Salaries/Wages/Contract labor	\$1,125.00	Description (If Category is "Other")	Expenditure Date*		20181016								
Category*	(\$) Expenditure Amount*																
Salaries/Wages/Contract labor	\$1,125.00																
Description (If Category is "Other")	Expenditure Date*																
	20181016																

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

[illegible]



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Expenditure

Itemize each direct campaign expenditure in Sections 1-4.

For additional expenditures, click "Add Another Expenditure Page" below.

1	PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual	Payee Title Payee First Name* Delwin Organization Name or Payee Last Name, as applicable* Goss Payee Suffix
2	PAYEE ADDRESS	Payee Address/ PO Box* 6410 Ponca Street Payee City* Austin Payee Apartment or Suite Number Payee State* TX Payee Zip Code* 78741
3	EXPENDITURE DETAILS	Category* Salaries/Wages/Contract labor (\$) Expenditure Amount* \$3,200.00 Description (If Category is "Other") Expenditure Date* 20181016

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, as applicable

Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Adler	Steve	Mayor	Mayor



Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of \$500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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, as applicable* Austin Firefighters PAC		
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* 7537 Cameron Road	Contributor Apartment or Suite Number 	
	Contributor City* Austin	Contributor State* TX	Contributor Zip Code* 78752
	Contributor Employer* 	Contributor Occupation* 	
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* 20180906		(\$) Contribution Amount* \$48,000.00

Add Another Contribution Page