



Pre-Election Report Political Committees Form ATX.7PAC

OCC RECEIVED AT
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Use this form to report contributions received and expenditures made between the 9th day before the Election and the day before the Election that have met the monetary thresholds identified in City Code 2-2-29. For detailed instructions on how to complete this form, see the **Pre-Election Report: Political Committees Instruction Guide**

1 COMMITTEE NAME	Committee Name* Austinites for Equity		
2 COMMITTEE ADDRESS	Address/ PO Box 1812 Centre Creek		Apartment or Suite Number
	City Austin	State TX	Zip Code 78754
3 COMMITTEE TREASURER NAME	Title 	First Name Jack	Middle Initial
	Nickname 	Last Name Kirfman	Suffix
4 COMMITTEE TREASURER ADDRESS	Address/ PO Box 1812 Centre Creek		Apartment or Suite Number
	City Austin	State TX	Zip Code 78754
5 REPORTING PERIOD	Start Date (yyyymmdd)* 20181029	THROUGH	End Date (yyyymmdd)* 20181029

* Indicates a required field

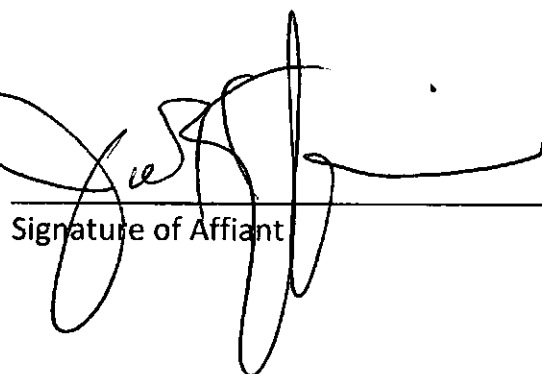


Pre-Election Report Political Committees Form ATX.7PAC

<p>6</p> <p>SCHEDULES ATTACHED</p> <p><i>Check box for each form attached</i></p>	<p><input type="checkbox"/> Schedule ATX.7A - Pre-Election Report of Contributions</p> <p><input checked="" type="checkbox"/> Schedule ATX.7F - Pre-Election Report of Expenditures</p>
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AFFIDAVIT

By signature below, I certify that the 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)

Contribution

Itemize each contribution in Sections 1-3.

For additional contributions, click "Add Another Contribution Page" below.

* Indicates a required field

1 CONTRIBUTOR NAME <input type="checkbox"/> Contributor is an individual	 Organization Name or Contributor Last Name, as applicable* <input type="text"/>																								
2 CONTRIBUTOR ADDRESS AND EMPLOYER	<table border="1"><tr><td colspan="2">Contributor Address/ PO Box*</td><td colspan="2">Contributor Apartment or Suite Number</td></tr><tr><td colspan="2"><input type="text"/></td><td colspan="2"><input type="text"/></td></tr><tr><td>Contributor City*</td><td>Contributor State*</td><td colspan="2">Contributor Zip Code*</td></tr><tr><td><input type="text"/></td><td><input type="text" value="TX"/></td><td colspan="2"><input type="text"/></td></tr><tr><td colspan="2">Contributor Employer</td><td colspan="2">Contributor Occupation</td></tr><tr><td colspan="2"><input type="text"/></td><td colspan="2"><input type="text"/></td></tr></table> <p>Per City Code 2-2-29(d), employer and occupation are required for individuals whose contribution is \$200 or more</p>	Contributor Address/ PO Box*		Contributor Apartment or Suite Number		<input type="text"/>		<input type="text"/>		Contributor City*	Contributor State*	Contributor Zip Code*		<input type="text"/>	<input type="text" value="TX"/>	<input type="text"/>		Contributor Employer		Contributor Occupation		<input type="text"/>		<input type="text"/>	
Contributor Address/ PO Box*		Contributor Apartment or Suite Number																							
<input type="text"/>		<input type="text"/>																							
Contributor City*	Contributor State*	Contributor Zip Code*																							
<input type="text"/>	<input type="text" value="TX"/>	<input type="text"/>																							
Contributor Employer		Contributor Occupation																							
<input type="text"/>		<input type="text"/>																							
3 CONTRIBUTION DETAILS	<table border="1"><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td colspan="2">In-Kind Contribution Description, if applicable</td></tr><tr><td colspan="2"><input type="text"/></td></tr></table>	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*	<input type="text"/>	<input type="text"/>	In-Kind Contribution Description, if applicable		<input type="text"/>																	
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<input type="text"/>	<input type="text"/>																								
In-Kind Contribution Description, if applicable																									
<input type="text"/>																									

Add Another Contribution Page



Pre-Election Report of Expenditures: Schedule ATX.7F

(Attach to Form ATX.7PAC Coversheet)

Expenditure

Itemize each expenditure in Sections 1-3.

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

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

1	PAYEE NAME <input type="checkbox"/> Payee is an individual	Organization Name or Payee Last Name, as applicable* Austin Citizens for Truthful Petitions PAC		
2	PAYEE ADDRESS	Payee Address/ PO Box* 1507 West 6th St	Payee Apartment or Suite Number 	
		Payee City* Austin	Payee State* TX	Payee Zip Code* 78754
3	EXPENDITURE DETAILS	Category* Other (use Description field)	(\$) Expenditure Amount* \$3,000.00	
		Description (If Category is "Other") Contribution	Expenditure Date* 20181029	

Add Another Expenditure Page



Pre-Election Report of Expenditures: Schedule ATX.7F

(Attach to Form ATX.7PAC Coversheet)

Expenditure

Itemize each expenditure in Sections 1-3.

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

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

1 PAYEE NAME <input type="checkbox"/> Payee is an individual	Organization Name or Payee Last Name, as applicable* <div></div>		
2 PAYEE ADDRESS	Payee Address/ PO Box* <div></div>	Payee Apartment or Suite Number <div></div>	
	Payee City* <div></div>	Payee State* <div></div>	Payee Zip Code* <div></div>
3 EXPENDITURE DETAILS	Category* <div></div> Description (If Category is "Other") <div></div> (\$) Expenditure Amount* <div></div> Expenditure Date* <div></div>		

Add Another Expenditure Page