

Report of Direct Campaign Expenditures:ATX.1 COVERSHEET

1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 6		
	LAST; SUFFIX Austinites for Equity	ACCOUNT # 00090449		
2 INDIVIDUAL OR ORGANIZATION ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1812 Centre Creek Dr Suite 310		Date Received ELECTRONICALLY FILED 10/16/2020	
	Austin, TX 78754		Receipt #	
	<input type="checkbox"/> (CHECK IF FILER'S HOME ADDRESS)		HD / PM	Amount
	FILER OCCUPATION		Date Processed	
3 INDIVIDUAL FILER EMPLOYER & OCCUPATION	FILER EMPLOYER		Date Imaged	
4 COMMITTEE TREASURER NAME	TITLE; FIRST; MI; LAST; SUFFIX Jack			
	Kirfman			
5 COMMITTEE TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1812 Centre Creek Dr Suite 310			
	Austin, TX 78754			

Expenditure

FORM ATX1EXPEND

1 FILER NAME Austinites for Equity		2 FILER ID 00090449	3 Total pages Schedule ATX8EXPEND: Sch: 1/4 Rpt: 2/6
4 PAYEE NAME	LAST FIRST MI Austin Chronicle		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code PO Box 4189 Austin, TX 78765-4189		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/05/2020	(d) Amount (\$) \$554.80	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title Chincanch David	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought Council Member, District 2	(d) Office held	

Expenditure

FORM ATX1EXPEND

1 FILER NAME Austinites for Equity		2 FILER ID 00090449	3 Total pages Schedule ATX8EXPEND: Sch: 2/4 Rpt: 3/6
4 PAYEE NAME	LAST FIRST MI Austin Chronicle		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code PO Box 4189 Austin, TX 78765-4189		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/05/2020	(d) Amount (\$) \$554.80	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title Alter Alison	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought Council Member, District 10	(d) Office held Council Member, District 10	

Expenditure

FORM ATX1EXPEND

1 FILER NAME Austinites for Equity	2 FILER ID 00090449	3 Total pages Schedule ATX8EXPEND: Sch: 3/4 Rpt: 4/6
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4 PAYEE NAME	LAST FIRST MI (see previous)
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5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code
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6 EXPENDITURE DETAILS	(a) Category	(b) Description
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	(c) Date	(d) Amount (\$)
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7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title Flannigan Jimmy	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)
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	(c) Office sought Council Member, District 6	(d) Office held Council Member, District 6
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Expenditure

FORM **ATX1EXPEND**

1 FILER NAME Austinites for Equity	2 FILER ID 00090449	3 Total pages Schedule ATX8EXPEND: Sch: 4/4 Rpt: 5/6
4 PAYEE NAME	LAST FIRST MI (see previous)	
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code	
6 EXPENDITURE DETAILS	(a) Category	(b) Description
	(c) Date	(d) Amount (\$)
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title Pool Leslie	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)
	(c) Office sought Council Member, District 7	(d) Office held Council Member, District 7

Report of Direct Campaign Expenditures:

ATX.1

AFFIDAVIT

This information serves as the electronic signature of the person legally responsible for filing this report.

I swear or affirm under 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 or affirm under penalty of perjury that this Report of Direct Campaign Expenditures 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.

Austinites for Equity

Signature of Filer