

# Report of Direct Campaign Expenditures:ATX.1 COVERSHEET

1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 5	
	LAST; SUFFIX SafeTX Political Action Committee	ACCOUNT # 00090522	
2 INDIVIDUAL OR ORGANIZATION ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		Date Received
	815 Brazos Street		<b>ELECTRONICALLY FILED</b>
	Ste 701		10/26/2020
	Austin, TX 78701		Receipt #
3 INDIVIDUAL FILER EMPLOYER & OCCUPATION	FILER OCCUPATION	FILER EMPLOYER	HD / PM
			Amount
4 COMMITTEE TREASURER NAME	TITLE; FIRST; MI; LAST; SUFFIX		Date Processed
	Paul J.		Date Imaged
5 COMMITTEE TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	815 Brazos Street		
	Ste 701		
	Austin, TX 78701		

OFFICE USE ONLY	
Date Received	ELECTRONICALLY FILED
	10/26/2020
Receipt #	
HD / PM	Amount
Date Processed	
Date Imaged	

# Expenditure

FORM ATX1EXPEND

<b>1</b> FILER NAME SafeTX Political Action Committee		<b>2</b> FILER ID 00090522	<b>3</b> Total pages Schedule ATX8EXPEND:  Sch: 1/1 Rpt: 2/5
<b>4</b> PAYEE NAME	LAST FIRST MI Upstream Communications		
<b>5</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  3101 Perry Ln  Austin, TX 78731		
<b>6</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/23/2020	<b>(d)</b> Amount (\$) \$12,953.75	
<b>7</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title  Alter Alison	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought  Council Member, District 10	<b>(d)</b> Office held  Council Member, District 10	

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 1/2 Rpt: 3/5
<b>2</b> FILER NAME SafeTX Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00090522
<b>4</b> Date 10/20/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bresnen, Steven (Mr.) <b>6</b> Contributor address; City; State; Zip Code 311 W. 5th St., #1002  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$2,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Bresnen Associates
Date 10/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bury III, Paul (Mr.) Contributor address; City; State; Zip Code 2615 Harris Blvd  Austin, TX 78703	Amount of Contribution (\$)  \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carr, Scott (Mr.) Contributor address; City; State; Zip Code 1105 Chatelaine Cove  Austin, TX 78746	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions) Commercial Real Estate		Employer (See Instructions) Carr Development
Date 10/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Christian, Elizabeth (Ms.) Contributor address; City; State; Zip Code 7629 Rockpoint Dr.  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) PR Executive		Employer (See Instructions) Elizabeth Christian Public Relations
Date 10/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ellmer, Minday (Ms.) Contributor address; City; State; Zip Code 200 Congress Ave. Unit 40FF  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-employed

# Contribution

FORM **ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 2/2 Rpt: 4/5
<b>2</b> FILER NAME SafeTX Political Action Committee		<b>3</b> Filer ID (Ethics Commission Filers) 00090522
<b>4</b> Date 10/12/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Farmer, Gary (Mr.) <b>6</b> Contributor address; City; State; Zip Code 3148 Above Stratford Place  Austin, TX 78746	<b>7</b> Amount of Contribution (\$)  \$10,000.00
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) Heritage Title Co of Austin
Date 10/20/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) JBS Holdings 01-03 Contributor address; City; State; Zip Code 3605 Balcones Dr.  Austin, TX 78731	Amount of Contribution (\$)  \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mullins, Lindsay (Ms.) Contributor address; City; State; Zip Code 6205 La Naranja Lane  Austin, TX 78749	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Public Affairs Director		Employer (See Instructions) BNSF Railway

# 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.

SafeTX Political Action Committee

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Signature of Filer