

Report of Direct Campaign Expenditures:ATX.1 COVERSHEET

1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 4	
	LAST; SUFFIX Austinites for Equity	ACCOUNT # 00090449	
	OFFICE USE ONLY		
2 INDIVIDUAL OR ORGANIZATION ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1812 Centre Creek Dr Suite 310	Date Received ELECTRONICALLY FILED 04/29/2021	
	Austin, TX 78754	Receipt #	
	<input type="checkbox"/> (CHECK IF FILER'S HOME ADDRESS)	HD / PM	Amount
		Date Processed	
3 INDIVIDUAL FILER EMPLOYER & OCCUPATION	FILER 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: 1/1 Rpt: 2/4
4 PAYEE NAME	LAST FIRST MI Y Strategy LLC		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 3110 Manor Rd. Ste. H Austin, TX 78723		
6 EXPENDITURE DETAILS	(a) Category Consulting Expense	(b) Description	
	(c) Date 04/28/2021	(d) Amount (\$) \$59,429.36	
7 Complete <u>ONLY</u> if candidate or ballot measure suported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed X (CHECK IF BALLOT MEASURE) Prop F OPPOSE	
	(c) Office sought	(d) Office held	

Contribution

FORM **ATX1CONTRIB**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule ATX1:
Sch: 1/1 Rpt: 3/4

2 FILER NAME
Austinites for Equity

3 Filer ID (Ethics Commission Filers)
00090449

4 Date
04/23/2021

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
Austin AFL-CIO Council Labor Day Fund

7 Amount of Contribution (\$)
\$2,500.00

6 Contributor address; City; State; Zip Code
PO Box 87

Austin, TX 78767

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
04/23/2021

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Austin-Travis County EMS Emp Assoc.

Amount of Contribution (\$)
\$5,000.00

Contributor address; City; State; Zip Code
5817 Wilcab Rd.
Ste. 3
Austin, TX 78721

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
04/23/2021

Full name of contributor ☐ out-of-state PAC (ID#: _____)
RECA Business M/PAC

Amount of Contribution (\$)
\$10,000.00

Contributor address; City; State; Zip Code
98 San Jacinto Blvd.
Ste. 510
Austin, TX 78701

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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