

Report of Direct Campaign Expenditures:ATX.1 COVERSHEET

1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 8	
	LAST; SUFFIX Equity PAC	ACCOUNT # 00090717	
	OFFICE USE ONLY		
2 INDIVIDUAL OR ORGANIZATION ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 300812	Date Received ELECTRONICALLY FILED 10/14/2021	
	Austin, TX 78703	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 Catina Voellinger		
5 COMMITTEE TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 9901 Brodie Lane Ste 160 #1143 Austin, TX 78748		

Expenditure

FORM **ATX1EXPEND**

1 FILER NAME Equity PAC		2 FILER ID 00090717	3 Total pages Schedule ATX8EXPEND: Sch: 1/3 Rpt: 2/8
4 PAYEE NAME	LAST FIRST MI Stronger Than Communications LLC		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 7314 Trescott Ave Takoma Park, MD 20912		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/12/2021	(d) Amount (\$) \$10,000.00	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Expenditure

FORM **ATX1EXPEND**

1 FILER NAME Equity PAC		2 FILER ID 00090717	3 Total pages Schedule ATX8EXPEND: Sch: 2/3 Rpt: 3/8
4 PAYEE NAME	LAST FIRST MI Stronger Than Communications LLC		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 7314 Trescott Ave Takoma Park, MD 20912		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/13/2021	(d) Amount (\$) \$49,999.99	
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 (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Expenditure

FORM **ATX1EXPEND**

1 FILER NAME Equity PAC		2 FILER ID 00090717	3 Total pages Schedule ATX8EXPEND: Sch: 3/3 Rpt: 4/8
4 PAYEE NAME	LAST FIRST MI La Prensa		
5 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 1704 E 5th St 103 Austin, TX 78702		
6 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/13/2021	(d) Amount (\$) \$1,000.00	
7 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought	(d) Office held	

Contribution

FORM **ATX1CONTRIB**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule ATX1: Sch: 1/3 Rpt: 5/8
2 FILER NAME Equity PAC		3 Filer ID (Ethics Commission Filers) 00090717
4 Date 10/06/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ayres, Robert <hr/> 6 Contributor address; City; State; Zip Code 3939 Bee Caves Rd. Austin, TX 78746	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Land Steward		9 Employer (See Instructions) Shield Ranch
Date 10/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Central Texas Building & Construction Trade Coucil <hr/> Contributor address; City; State; Zip Code 1106 Lavaca St #201 Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk, Rudy and Amy <hr/> Contributor address; City; State; Zip Code 3301 Bowman Avenue Austin, TX 78703	Amount of Contribution (\$) \$5,263.47
Principal occupation / Job title (See Instructions) None		Employer (See Instructions) None
Date 10/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LAD <hr/> Contributor address; City; State; Zip Code PO BOX 49712 Austin, TX 78765	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laborers' Local 1095 <hr/> Contributor address; City; State; Zip Code 5555 N Lamar Blvd E121 Austin, TX 78751	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Contribution

FORM ATX1CONTRIB

The Instruction Guide explains how to complete this form.		1 Total pages Schedule ATX1: Sch: 2/3 Rpt: 6/8
2 FILER NAME Equity PAC		3 Filer ID (Ethics Commission Filers) 00090717
4 Date 10/09/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leib, Benjamin <hr/> 6 Contributor address; City; State; Zip Code 10024 Austral Cove Austin, TX 78739	7 Amount of Contribution (\$) \$526.63
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Twitter
Date 10/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOVEMENT VOTER PAC <hr/> Contributor address; City; State; Zip Code 37 Bridge St Northampton, MD 01061	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Open Society Policy Center <hr/> Contributor address; City; State; Zip Code 1730 Pennsylvania Avenue NW Washington, DC 20006	Amount of Contribution (\$) \$500,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southwest Laborer's District Council <hr/> Contributor address; City; State; Zip Code 11720 East 21st Street Tulsa, OK 74129	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/06/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas American Federation of Teachers <hr/> Contributor address; City; State; Zip Code 912 S Hwy 183 Suite 100-A Austin, TX 78741	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Contribution

FORM **ATX1CONTRIB**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule ATX1:
Sch: 3/3 Rpt: 7/8

2 FILER NAME
Equity PAC

3 Filer ID (Ethics Commission Filers)
00090717

4 Date
10/07/2021

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
The International Brotherhood of Electrical Workers Local 520

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

6 Contributor address; City; State; Zip Code
4818 E Ben White Blvd #300

Austin, TX 78741

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
10/11/2021

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Tuttle, Tyson

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

Contributor address; City; State; Zip Code
608 Baylor St

Austin, TX 78703

Principal occupation / Job title (See Instructions)
CEO

Employer (See Instructions)
Silicon Labs

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.

Equity PAC

Signature of Filer