

# CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

<b>1</b> Filer ID (Ethics Commission Filers) 00090573		<b>2</b> Total pages filed: 5		<b>OFFICE USE ONLY</b>	
<b>3</b> COMMITTEE NAME Austin DSA in Action				Date Received ELECTRONICALLY FILED 10/27/2021	
<b>4</b> TREASURER NAME Nachbar, Michael				Date Hand-delivered or Date Postmarked	
<b>5</b> ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election		<input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer resignation <input type="checkbox"/> Dissolution report <input type="checkbox"/> Other (specify) _____	
<b>6</b> ORIGINAL PERIOD COVERED		Month Day Year 07/01/2021		THROUGH Month Day Year 09/23/2021	
				Receipt # Amount	
				Date Processed	
				Date Imaged	

**7 EXPLANATION OF CORRECTION**

The contribution balance for the period was erroneously placed in Section 15, Line 5 and the total contributions maintained placed in Section 15, line 6. The committee had \$411.13 contributions on hand and no outstanding loans.

**8 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

☐ **Semiannual reports:** I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Michael Nachbar  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090573		2 Total pages filed: 5	
3 COMMITTEE NAME Austin DSA in Action				OFFICE USE ONLY	
				Date Received ELECTRONICALLY FILED 10/27/2021	
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3001 e 18th 1/2 st  austin, TX 78702				
	Date Hand-delivered or Date Postmarked				
	Receipt #		Amount		
	Date Processed				
	Date Imaged				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR		FIRST		MI
			Michael		
	NICKNAME		LAST		SUFFIX
			Nachbar		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3001 e 18th 1/2 st  austin , TX 78702				
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  TX				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (302) 545-9252				
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff				
10 PERIOD COVERED	Month Day Year      Month Day Year 07/01/2021      THROUGH      09/23/2021				
11 ELECTION	ELECTION DATE Month Day Year 11/02/2021		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input checked="" type="checkbox"/> Special		

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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Austin DSA in Action		<b>13 Filer ID</b> (Ethics Commission Filers) 00090573	
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported	
		B. Opposed	
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed      Ballot ID:Prop A Election Date:2021-11-02 Desc:Police Staffing Standards	
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)		
	<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b> <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,087.24
<b>EXPENDITURE TOTALS</b>	<b>3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED</b>	\$	0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$	0.00
<b>CONTRIBUTION BALANCE</b>	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$	411.13
<b>OUTSTANDING LOAN TOTALS</b>	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$	0.00

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Michael Nachbar  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
4 of 5

<b>17 COMMITTEE NAME</b> Austin DSA in Action		<b>18 Filer ID</b> (Ethics Commission Filers) 00090573
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 100.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input checked="" type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 987.24
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C2: Sch: 1/1 Rpt: 5/5	
2 FILER NAME Austin DSA in Action		3 Filer ID (Ethics Commission Filers) 00090573	
4 Date 09/10/2021	5 Corporation / Labor Organization name Austin Democratic Socialists of America	7 Amount of contribution(\$) \$987.24	8 In-kind contribution description Door hangers/Fliers
	6 Corporation / Labor Organization address; City; State; Zip Code 8701 SHOAL CREEK BLVD STE 401  Austin, TX 78757		
<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			