Report of Dir	ect Campaign Expenditures:ATX.1 ET			
1 INDIVIDUAL OR ORGANIZATION NAME	ORGANIZATION		PAGE #	
NAME	LAST; SUFFIX Austin Firefighters PAC	ACCOUNT # 00090512		
		OFFICE	USE ONLY	
2 INDIVIDUAL OR ORGANIZATION ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7537 Cameron Road  Austin , TX 78752	Date Received ELECTRONIC 10/23/2020 Receipt #	ALLY FILED	
	(CHECK IF FILER'S HOME ADDRESS)	HD / PM	Amount	
3 INDIVIDUAL FILER EMPLOYER & OCCUPATION	FILER OCCUPATION FILER EMPLOYER	Date Processed		
4 COMMITTEE TREASURER NAME	TITLE; FIRST; MI; LAST; SUFFIX	Date Imaged		
	David  Lundstedt			
5 COMMITTEE TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7537 Cameron Road			
	Austin , TX 78752			

Expenditure				FORM ATX1EXPEND
FILER NAME     Austin Firefighters PAC		FILER ID 00090512		3 Total pages Schedule ATX8EXPEND:
Austin Filelighters FAC		00090312		Sch: 1/3 Rpt: 2/5
4 PAYEE NAME	LAST FIRST MI Chincanchan, David			
5 PAYEE ADDRESS		tment/suit#; City;	State; Zip	Code
	PO Box 19563			
	Austin, TX 78760			
6 EXPENDITURE DETAILS	(a) Category Other		(b) Description	D. Holison I. Commiss
	Other		Donation to	o David Chincanchan Campaign
	(c) Date		(d) Amount (\$)	
	10/20/2020		\$400.00	
7 Complete ONLY if	(a) Candidate/Officehold	der name	(h) Ballot measi	ure supported/opposed
candidate or ballot measure	LastName; Suffix;		(a) Danse mease	о сарропом орросов
suported/opposed	Chincanch	David	(CHECI	K IF BALLOT MEASURE)
	(c) Office sought		(d) Office held	
	Council Member, [	District 2		

Expenditure				FORM ATX1EXPEND
1 FILER NAME Austin Firefighters PAC		2 FILER ID 00090512		3 Total pages Schedule ATX8EXPEND:
Austin'i l'elighters i Ae		00030312		Sch: 2/3 Rpt: 3/5
4 PAYEE NAME	LAST FIRST MI Alter, Alison			
5 PAYEE ADDRESS	Payee address;	apartment/suit#; City;	State; Zip	Code
	4401 Bellvue Ave	enue		
	Austin, TX 78756	<b>i</b>		
6 EXPENDITURE DETAILS	(a) Category		(b) Description	
	Other		Donation to	o Alison Alter Campaign
	(c) Date		(d) Amount (\$)	
	10/20/2020		\$400.00	
7 Complete ONLY if	(a) Candidata/Office	pholder name	(h) Pallat maga	ura aumantadiannaaad
candidate or ballot measure	(a) Candidate/Office LastName; Su	offix; FirstName; Title	(b) ballot meast	ure supported/opposed
suported/opposed			(CHEC	K IF BALLOT MEASURE)
	Alter	Alison	,	,
	(c) Office sought		(d) Office held	
	Council Memb	er, District 10	Council Me	ember, District 10

Expenditure				FORM ATX1EXPEND
FILER NAME     Austin Firefighters PAC	:	2 FILER ID 00090512		3 Total pages Schedule ATX8EXPEND: Sch: 3/3 Rpt: 4/5
4 PAYEE NAME	LAST FIRST MI Flannigan, Jimmy	,		<u> </u>
5 PAYEE ADDRESS	Payee address; PO Box 301074	apartment/suit#; City;	State; Zip	Code
6 EXPENDITURE DETAILS	Austin , TX 7875.  (a) Category Other	2	(b) Description Donation to	o Jimmy Flannigan Campaign
	(c) Date 10/22/2020		(d) Amount (\$) \$400.00	
7 Complete <u>ONLY</u> if candidate or ballot measure suported/opposed	(a) Candidate/Office LastName; Su Flannigan	eholder name ffix; FirstName; Title Jimmy		ure supported/opposed K IF BALLOT MEASURE)
	(c) Office sought  Council Memb	or District 6	(d) Office held	ember, District 6
	Council Metho	CI, DISUICE O	Council We	

## Report of Direct Campaign Expenditures: ATX.1

## AFFIDAVIT

<i>-</i>	AFFIDAVII	
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.	
	Austin Firefighters PAC	
	Signature of Filer	