

Report of Covered Transfers Supporting Direct Campaign Expenditures: ATX.8

COVER SHEET

1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 4
	LAST; SUFFIX KPW PAC	ACCOUNT # 00090910
2 INDIVIDUAL OR ORGANIZATION ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
	PO Box 2004	
	Austin, TX 78768	
	<input type="checkbox"/> (CHECK IF FILER'S HOME ADDRESS)	
OFFICE USE ONLY		
Date Received ELECTRONICALLY FILED 09/07/2022		
Receipt #		
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	
5 COMMITTEE TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE	
6 MEMO		

ATX.8 Transfers Made

1 FILER NAME KPW PAC	2 FILER ID 00090910	3 Total pages Schedule ATX8EXPEND: Sch: 1/1 Rpt: 2/4
3 MEMO		
4 RECIPIENT NAME	LAST FIRST MI Affordable Housing Bond PAC	
5 RECIPIENT ADDRESS	RECIPIENT ADDRESS APARTMENT/SUITE# CITY STATE ZIPCODE PO Box 90591 Austin, TX 78709	
6 TRANSFER DETAILS	(a) TRANSFER DATE 08/31/2022	(b) TRANSFER AMOUNT (\$) \$15,000.00
	(c) PURPOSE AND DESCRIPTION OF TRANSFER Contribution	
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 X (CHECK IF BALLOT MEASURE) affordable housing bond SUPPORT
	(c) Office sought	(d) Office held

ATX.8 CONTRIBUTIONS RECIEVEDFORM **ATX8CONTRIB****The Instruction Guide explains how to complete this form.**

1 FILER NAME KPW PAC	2 Filer ID (Ethics Commission Filers) 00090910	
3 MEMO		
4 Contributor Name	5 Contributor Title; Contributor First Name; Contributor Last Name; Organization Name; Contributor Suffix Kirk Watson Campaign	
6 Contributor Address and Employer	Contributor address; City; State; Zip Code; Apartment or Sutie Number; Contributor Employer; Contributor Occupation PO Box 2004 Austin, TX 78768	
7 Contribution Details	Contribution Date 06/28/2022	Contribution Amount(\$) \$1,186,763.65

**Report of Covered Transfers Supporting
Direct Campaign Expenditures Declaration:
AFFIDAVIT**

This information serves as the electronic signature of the person legally responsible for filing this report.

By signature below, I swear or affirm under penalty of perjury that the Report of Covered Transfers Supporting Direct Campaign Expenditures filed with this signature is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code Section 2-2-34.

KPW PAC

Signature of Filer