

Report of Direct Campaign Expenditures:ATX.1 COVERSHEET

1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 10	
	LAST; SUFFIX Capital Area Progressive Democrats	ACCOUNT # 00090920	
2 INDIVIDUAL OR ORGANIZATION ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 413 Austin, TX 78767	OFFICE USE ONLY	
	<input type="checkbox"/> (CHECK IF FILER'S HOME ADDRESS)	Date Received ELECTRONICALLY FILED 10/24/2022	Receipt #
		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		
5 COMMITTEE TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
6 MEMO			

Expenditure

FORM ATX1EXPEND

1 FILER NAME Capital Area Progressive Democrats		2 FILER ID 00090920	3 Total pages Schedule ATX1EXPEND: Sch: 1/6 Rpt: 2/10
4 MEMO			
5 PAYEE NAME	LAST FIRST MI The Austin Chronicle		
6 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 4000 N. IH-35 Austin, TX 78751		
7 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 10/21/2022	(d) Amount (\$) \$1,345.00	
8 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title Watson Kirk	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought Mayor	(d) Office held	

Expenditure

FORM **ATX1EXPEND**

1 FILER NAME Capital Area Progressive Democrats		2 FILER ID 00090920		3 Total pages Schedule ATX1EXPEND: Sch: 2/6 Rpt: 3/10	
4 MEMO					
5 PAYEE NAME		LAST FIRST MI (see previous)			
6 PAYEE ADDRESS		Payee address; apartment/suit#; City; State; Zip Code			
7 EXPENDITURE DETAILS		(a) Category		(b) Description	
		(c) Date		(d) Amount (\$)	
8 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed		(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title Harper- Natasha		(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
		(c) Office sought Council Member, District 1		(d) Office held Council Member, District 1	

Expenditure

FORM ATX1EXPEND

1 FILER NAME Capital Area Progressive Democrats		2 FILER ID 00090920		3 Total pages Schedule ATX1EXPEND: Sch: 3/6 Rpt: 4/10	
4 MEMO					
5 PAYEE NAME		LAST FIRST MI (see previous)			
6 PAYEE ADDRESS		Payee address; apartment/suit#; City; State; Zip Code			
7 EXPENDITURE DETAILS		(a) Category		(b) Description	
		(c) Date		(d) Amount (\$)	
8 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed		(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title Craig Ken		(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
		(c) Office sought Council Member, District 5		(d) Office held	

Expenditure

FORM **ATX1EXPEND**

1 FILER NAME Capital Area Progressive Democrats	2 FILER ID 00090920	3 Total pages Schedule ATX1EXPEND: Sch: 4/6 Rpt: 5/10
4 MEMO		
5 PAYEE NAME	LAST FIRST MI (see previous)	
6 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code	
7 EXPENDITURE DETAILS	(a) Category	(b) Description
	(c) Date	(d) Amount (\$)
8 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title Ellis Paige	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)
	(c) Office sought Council Member, District 8	(d) Office held Council Member, District 8

Expenditure

FORM ATX1EXPEND

1 FILER NAME Capital Area Progressive Democrats		2 FILER ID 00090920	3 Total pages Schedule ATX1EXPEND: Sch: 5/6 Rpt: 6/10
4 MEMO			
5 PAYEE NAME	LAST FIRST MI (see previous)		
6 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code		
7 EXPENDITURE DETAILS	(a) Category	(b) Description	
	(c) Date	(d) Amount (\$)	
8 Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title Guerrero Linda	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought Council Member, District 9	(d) Office held	

Expenditure

FORM **ATX1EXPEND**

1 FILER NAME Capital Area Progressive Democrats	2 FILER ID 00090920	3 Total pages Schedule ATX1EXPEND: Sch: 6/6 Rpt: 7/10
4 MEMO		
5 PAYEE NAME	LAST FIRST MI (see previous)	
6 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code	
7 EXPENDITURE DETAILS	(a) Category	(b) Description
	(c) Date	(d) Amount (\$)
8 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) Proposition A SUPPORT
	(c) Office sought	(d) Office held

Contribution

FORM **ATX1CONTRIB**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule ATX1: Sch: 1/2 Rpt: 8/10
2 FILER NAME Capital Area Progressive Democrats		3 Filer ID (Ethics Commission Filers) 00090920
4 MEMO		
5 Date 09/01/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agnew, Virginia 7 Contributor address; City; State; Zip Code 1204 Castle Hill St Austin, TX 78703	8 Amount of Contribution (\$) \$500.00
9 Principal occupation / Job title (See Instructions) N/A		10 Employer (See Instructions) Not Employed
Date 09/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Andy (The Honorable) Contributor address; City; State; Zip Code 6000 Lonesome Valley Trl Austin, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Travis County Judge
Date 09/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark Meachum, Amy (The Honorable) Contributor address; City; State; Zip Code 3900 Sidehill Path Austin, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 09/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deseta Lyttle, Daniella Contributor address; City; State; Zip Code 1811 W. Ben White Blvd Ste. 101 Austin, TX 78704	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Lyttle Law Firm PLLC
Date 10/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KPW PAC Contributor address; City; State; Zip Code 4017 Avenue H 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: 2/2 Rpt: 9/10
2 FILER NAME Capital Area Progressive Democrats		3 Filer ID (Ethics Commission Filers) 00090920
4 MEMO		
5 Date 09/15/2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Needles, Tamara (The Honorable) <hr/> 7 Contributor address; City; State; Zip Code P.O. Box 160881 Austin, TX 78716	8 Amount of Contribution (\$) \$500.00
9 Principal occupation / Job title (See Instructions) Judge		10 Employer (See Instructions) State of Texas
Date 09/19/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Velva (The Honorable) <hr/> Contributor address; City; State; Zip Code 1601 Ridgemont Dr Austin, TX 78723	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) District Clerk		Employer (See Instructions) Travis County

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.

Capital Area Progressive Democrats

Signature of Filer