Report of Direct Campaign Expenditures:ATX.1 COVERSHEET

COVERSHEE	ET			
1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 6		
	LAST; SUFFIX	ACCOUNT #		
	Austin Firefighters Public Safety Fund	00090451		
		OFFICE	USE ONLY	
2 INDIVIDUAL OR ORGANIZATION ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 7537 Cameron Road	Date Received ELECTRONICALLY FILED 11/02/2022		
	Austin, TX 78752	Receipt #		
	(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		
	Gregory			
	Роре			
5 COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE			
TREASURER ADDRESS	205 Longspur Drive			
	Buda, TX 78610			
6 MEMO				

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	Expenditure					FORM ATX1EXPEND
$\left \right _{1}$	FILER NAME		2 FILER ID			3 Total pages Schedule ATX1EXPEND:
1	Austin Firefighters Pub	lic Safety Fund	00090451			3 Total pages Schedule ATATEAPEND.
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F		1				
4	MEMO					
5	PAYEE NAME	LAST FIRST MI Meta				
6	PAYEE ADDRESS	Payee address;	apartment/suit#;	City;	State; Zip	Code
		1 Hacker Way				
			24005			
		Menlo Park, CA	94025			
7	EXPENDITURE DETAILS	(a) Category			(b) Description	
	DETAILS	Advertising Ex	pense			
F		(c) Date			(d) Amount (\$)	
		11/01/2022			\$900.00	
					+++++++++++++++++++++++++++++++++++++++	
8	Complete <u>ONLY</u> if candidate or ballot	(a) Candidate/Offic	eholder name		(b) Ballot measu	ure supported/opposed
	measure	LastName; Su	ıffix; FirstName;	Title		
	suported/opposed					
		Craig	Ken		(CHEC	K IF BALLOT MEASURE)
\vdash		(c) Office sought			(d) Office held	
		(c) Onice sought				
		Council Memb	er, District 5			

	Expenditure					FORM ATX1EXPEND
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	Austin Firenginters Fub	nic Salety I unu	00030431			Sch: 2/4 Rpt: 3/6
		1				
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 (\$)	
					(.,	
L						
8	Complete <u>ONLY</u> if candidate or ballot	(a) Candidate/Offic	eholder name		(b) Ballot measu	ire supported/opposed
	measure	LastName; Si	uffix; FirstName; 1	Title		
	suported/opposed				(CHEC)	(IF BALLOT MEASURE)
		Watson	Kirk			,
⊢		(c) Office sought			(d) Office held	
		Mayor				

	Expenditure				FORM ATX1EXPEND
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4	МЕМО				
5	PAYEE NAME	LAST FIRST MI Modern Cartogra	phers LLC		
6	PAYEE ADDRESS	Payee address;	apartment/suit#; City;	State; Zip	Code
		703 Pier Avenue			
		Suite B373			
		Hermosa Beach,	CA 90254		
7	EXPENDITURE DETAILS	(a) Category Advertising Ex	nonco	(b) Description	
			pense		
		(c) Date		(d) Amount (\$)	
		11/01/2022		\$32,650.64	1
8	Complete <u>ONLY</u> if candidate or ballot	(a) Candidate/Office	eholder name	(b) Ballot meas	ure supported/opposed
	measure	LastName; Su	ıffix; FirstName; Title		
	suported/opposed				K IF BALLOT MEASURE)
		Craig	Ken	(CHEC	R IF BALLOT MEASURE)
⊢		(c) Office sought		(d) Office held	
		Council Memb	or District E		

Expenditure				FORM ATX1EXPEND
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	1			
4 MEMO				
5 PAYEE NAME	LAST FIRST MI			
	(see previous)			
6 PAYEE ADDRESS	Payee address;	apartment/suit#; City;	State; Zip	o Code
7 EXPENDITURE DETAILS	(a) Category		(b) Description	
	(c) Date		(d) Amount (\$)	
			(c) , anount (¢)	
8 Complete ONLY if	(a) Candidate/Offic	eholder name	(b) Ballot meas	ure supported/opposed
candidate or ballot measure	LastName; S	uffix; FirstName; Title		
suported/opposed			(0)	
	Watson	Kirk		CK IF BALLOT MEASURE)
	(c) Office sought		(d) Office held	
	Mayor			

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.

Austin Firefighters Public Safety Fund

Signature of Filer