

## AUSTIN CITY CLERK RECEIVED

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1 Total pages filed:	2 Filer Name	Kat Hoang				
3	Committee Nam	e				
COMMITTEE NAME	Our City Our Saf	ety Our Choice				
4	Address/ PO Box			Apartment or :	Suite Number	
COMMITTEE	PO Box 6193	PO Box 6193				
ADDRESS	City	City		State	Zip Code	
	Austin			ΤX	78762	
5 COMMITTEE TREASURE	Title	First Name Joseph			Middle Initial	
NAME		L				
NAIVIE	Nickname	Last N		<del>.</del>	Suffix	
		Prime				
6	Address/ PO Box	<b>K</b>		Apartment or 3	Suite Number	
	1507 W. 6th					
COMMITTEE TREASURE	City			State	Zip Code	
ADDRESS	Austin			тх	78703	
PHONE	Phone Number (	###-###-####)	Extension, if a	pplicable		
,	51	2-478-7816				
7	Start Date (yyyyı	mmdd)		End Date (	(yyyymmdd)	
REPORTING PERIOD	20160506		THROUGH	20160506		· ·
	<u> </u>					

1 Total pages filed:	2 Filer Name Kat Hoang
8 REPORTS	
ATTACHED  Check box for each form  attached	ATX.7F - Pre-Election Report of Expenditures

## **AFFIDAVIT**

By signature below, I certify that the preceding Special Pre-Election Report filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-29 for the reporting period indicated.

Signature of Affiant



Itemize each contribution in Sections 1-3. For additional contributions, click "Add Another Contribution Page" below.

1	Contributor Title Contributor First Name			
CONTRIBUTOR	Cindy			
NAME	Organization Name, or Contributor Last Name (if applicable)	ontributor Suffix		
Contributor is an individual	Kozmetsky			
2	Contributor Address/ PO Box	Contributor Apartm	ent or Suite Number	
CONTRIBUTOR	3949 Maple Ave	]		
ADDRESS	Contributor City	Contributor State	Contributor Zip Code	
AND	Dallas	тх	75219	
EMPLOYER	Contributor Employer	Contributor Occupa	tion	
		<u> </u>		
3	Contribution Date (yyyymmdd)	(\$) Contribution Amount		
CONTRIBUTION	20160506	\$1,000.00		
DETAILS	In-Kind Contribution Description, if applicable			

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