

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers)		2 Total pages filed:		OFFICE USE ONLY	
3 COMMITTEE NAME	Austinites for Equity			Date Received 2016 OCT 31 PM 4:45 RECEIVED AUSTIN CITY CLERK	Date Hand-delivered or Date Postmarked
4 TREASURER NAME	Jack Kirfinan				
5 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> July 15 <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution Report <input type="checkbox"/> 8th day before election <input type="checkbox"/> Other (specify _____)				
6 ORIGINAL PERIOD COVERED	Month Day Year Month Day Year 07 / 01 / 2014 THROUGH 12 / 31 / 2014			Receipt #	Amount \$
				Date Processed	
				Date Imaged	

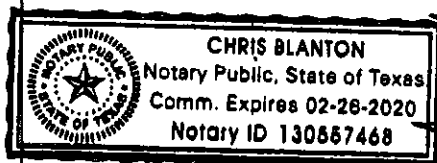
7 EXPLANATION OF CORRECTION

No correction of expenses during the reporting period. Filing to be in compliance with State guidelines

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:



☒ Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said Chris Blanton, this the 31 day of

October, 2016, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Chris Blanton
Printed name of officer administering

Notary Public
Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)		2 Total pages filed:	
3 COMMITTEE NAME Austinites for Equity				OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address 1812 Centre Creek Dr Suite 310 Austin, TX 78754				Date Received	
5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Jack NICKNAME LAST SUFFIX Kirfman				Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) 15408 Interlachen Dr Austin, TX 78717				Receipt # Amount \$	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address 1812 Centre Creek Dr Suite 310 Austin, TX 78754				Date Processed	
8 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION (512) 658-4892				Date Imaged	
9 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination			
10 PERIOD COVERED		Month Day Year Month Day Year 07 / 01 / 2014 THROUGH 12 / 31 / 2014			
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description 11 / 04 / 2014 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID (Ethics Commission Filers)
-------------------	--

14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input checked="" type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICEHOLDER <input type="checkbox"/> MEASURE	CANDIDATE / OFFICEHOLDER NAME Mike Martinez, Ora Houston, Delia Garza, Sabino Renteria, Greg Casar, Ann Kitchen, Jimmy Flannigan, Leslie Pool, Ed Scruggs, Kathy Tovo, Mandy Dealy OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Mayor, Dist 1,2,3,4,5,6,7,8,9,10 <table border="1" style="width:100%"> <tr> <td style="width:50%">BALLOT IDENTIFICATION / #</td> <td style="width:50%">ELECTION DATE Month / Day / Year</td> </tr> <tr> <td colspan="2">DESCRIPTION</td> </tr> </table>	BALLOT IDENTIFICATION / #	ELECTION DATE Month / Day / Year	DESCRIPTION	
	BALLOT IDENTIFICATION / #	ELECTION DATE Month / Day / Year				
	DESCRIPTION					

15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 87,939.39
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,866.94
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - SPAC**FORM SPAC
COVER SHEET PG 3**

17 COMMITTEE NAME		18 Filer ID (Ethics Commission Filers)
19	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATON OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 87,939.39
9.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
14.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
18	Austinites for Equity	
4 Date	5 Payee name	
10/17/2014	Austin FireFighters Pub Safety Fund	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
5000.00	7537 Cameron Road Austin TX 78752	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	TV Roll	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	Mike Martinez	Mayor City Council
Date	Payee name	
10-22-2014	Natalee Mathis	
Amount (\$)	Payee address; City; State; Zip Code	
84.00	7704 Copperas Dr Austin, TX 78749	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Blockwalking	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	Greg Casar	City Council District 4
Date	Payee name	
10-22-2014	Gattis Pizza	
Amount (\$)	Payee address; City; State; Zip Code	
35.00	7525 Hwy 290 East 78723	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Phone Bank-Food	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	Greg Casar	City Council District 4

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 10/20/2014		5 Payee name Kelly Graphics			
6 Amount (\$) 2,591.47		7 Payee address; City; State; Zip Code 1409 QuakerRidge Austin, TX 78746			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing and Postage		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sabino Renteria		Office sought City Council District 3	
Date 10-16-2014		Payee name FedEX Office			
Amount (\$) 219.47		Payee address; City; State; Zip Code 9222 Burnet Rd #101 Austin, TX 78758			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing-leaflet		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name LESLIE POOL		Office sought City Council District 7	
Date 10-20-2014		Payee name Kelly Graphics			
Amount (\$) 6753.65		Payee address; City; State; Zip Code 1409 QuakerRidge Austin, TX 78746			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing and Postage		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Mandy Dealey		Office sought City Council District 10	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)
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The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/2014		5 Payee name Mark Littlefield			
6 Amount (\$) 350.00		7 Payee address; City; State; Zip Code PO Box 90591 Austin, TX 78709			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Data Info		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name 10-1 Candidates		Office sought City Council and Mayor	
Date 10-24-2014		Payee name Worley Printing			
Amount (\$) 1763.53		Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Leslie Pool		Office sought City Council District 7	
Date 10-24-2014		Payee name Worley Printing			
Amount (\$) 1942.31		Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Postage		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Leslie Pool		Office sought City Council District 7	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Austinites for Equity	3 Filer ID (Ethics Commission Filers)			
4 Date 10/24/2014	5 Payee name Worley Printing				
6 Amount (\$) 2415.88	7 Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name Ed Scruggs</td> <td style="width:25%;">Office sought City Council District 8</td> <td style="width:25%;">Office held</td> </tr> </table>			Candidate / Officeholder name Ed Scruggs	Office sought City Council District 8	Office held
Candidate / Officeholder name Ed Scruggs	Office sought City Council District 8	Office held			
Date 10-24-2014	Payee name Worley Printing				
Amount (\$) 1942.31	Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Postage	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name Ed Scruggs</td> <td style="width:25%;">Office sought City Council District 8</td> <td style="width:25%;">Office held</td> </tr> </table>			Candidate / Officeholder name Ed Scruggs	Office sought City Council District 8	Office held
Candidate / Officeholder name Ed Scruggs	Office sought City Council District 8	Office held			
Date 10-24-2014	Payee name Worley Printing				
Amount (\$) 2253.49	Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
<table border="0" style="width:100%;"> <tr> <td style="width:50%;">Candidate / Officeholder name Kathie Tovo</td> <td style="width:25%;">Office sought City Council District 9</td> <td style="width:25%;">Office held City Council At large</td> </tr> </table>			Candidate / Officeholder name Kathie Tovo	Office sought City Council District 9	Office held City Council At large
Candidate / Officeholder name Kathie Tovo	Office sought City Council District 9	Office held City Council At large			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 10/24/2014		5 Payee name Worley Printing			
6 Amount (\$) 1942.31		7 Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Postage		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Kathie Tovo		Office sought City Council District 9	
Date 10-24-2014		Payee name Worley Printing			
Amount (\$) 1548.79		Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Jimmy Flannigan		Office sought City Council District 6	
Date 10-24-2014		Payee name Worley Printing			
Amount (\$) 1942.32		Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Postage		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Jimmy Flannigan		Office sought City Council District 6	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 10/28/2014		5 Payee name Austin Chronicle			
6 Amount (\$) 2114.00		7 Payee address; City; State; Zip Code PO Box 49066 Austin, TX 78765			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Endorsement Ad		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Mike Martinez		Office sought Mayor	
Date 10-29-2014		Payee name Austin American Statesman			
Amount (\$) 3470.00		Payee address; City; State; Zip Code PO Box 670 Austin, TX 78767			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Endorsement Ad		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Mike Martinez		Office sought Mayor	
Date 10-28-2014		Payee name Austin Chronicle			
Amount (\$) 925.00		Payee address; City; State; Zip Code PO Box 49066 Austin, TX 78765			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Endorsement Ad		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Ora Houston		Office sought City Council District 1	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 10/28/2014		5 Payee name Austin Chronicle			
6 Amount (\$) 925.00		7 Payee address; City; State; Zip Code PO Box 49066 Austin, TX 78765			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Endorsement Ad		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Kathie Tovo		Office sought City Council District 9	
Date 10-29-2014		Payee name Austin Chronicle			
Amount (\$) 925.00		Payee address; City; State; Zip Code PO Box 49066 Austin, TX 78765			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Endorsement Ad		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Delia Garza		Office sought City Council District 2	
Date 10-28-2014		Payee name Austin Chronicle			
Amount (\$) 925.00		Payee address; City; State; Zip Code PO Box 49066 Austin, TX 78765			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Endorsement Ad		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Sabino Renteria		Office sought City Council District 3	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 10/28/2014		5 Payee name Austin Chronicle			
6 Amount (\$) 925.00		7 Payee address; City; State; Zip Code PO Box 49066 Austin, TX 78765			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Endorsement Ad		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Ann Kitchen		Office sought City Council District 5	
Date 10-28-2014		Payee name Austin Chronicle			
Amount (\$) 925.00		Payee address; City; State; Zip Code PO Box 49066 Austin, TX 78765			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Endorsement Ad		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Greg Casar		Office sought City Council District 4	
Date 10-29-2014		Payee name Kelly Sullivan			
Amount (\$) 55.00		Payee address; City; State; Zip Code 5321 Valbum Circle Austin, TX 78731			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Phone bank		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Greg Casar		Office sought City Council District 4	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 10/29/2014		5 Payee name Kelly Sullivan			
6 Amount (\$) 55.00		7 Payee address; City; State; Zip Code 5321 Valburn Circle Austin, TX 78731			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Phone Bank		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jimmy Flannigan		Office sought City Council District 6	
Date 10-29-2014		Payee name Jon Green			
Amount (\$) 56.00		Payee address; City; State; Zip Code 614 S 1st #205 Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Block Walk		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Ed Scruggs		Office sought City Council District 8	
Date 10-28-2014		Payee name Austin Chronicle			
Amount (\$) 925.00		Payee address; City; State; Zip Code PO Box 49066 Austin TX 78765			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Endorsement Ad		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Ed Scruggs		Office sought City Council District 8	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 10/28/2014		5 Payee name Austin Chronicle			
6 Amount (\$) 925.00		7 Payee address; City; State; Zip Code PO Box 49066 Austin, TX 78765			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Endorsement Ad		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jimmy Flannigan		Office sought City Council District 6	
Date 10-28-2014		Payee name Austin Chronicle			
Amount (\$) 925.00		Payee address; City; State; Zip Code PO Box 49066 Austin, TX 78765			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Endorsement Ad		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Leslie Pool		Office sought City Council District 7	
Date 10-28-2014		Payee name Austin Chronicle			
Amount (\$) 925.00		Payee address; City; State; Zip Code PO Box 49066 Austin TX 78765			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Endorsement Ad		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Mandy Dealy		Office sought City Council District 10	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 10/30/2014		5 Payee name USPS			
6 Amount (\$) 1229.02		7 Payee address; City; State; Zip Code			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Postage		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Laura Pressley		Office sought City Council District <u>4</u> Office held	
Date 11-14-2014		Payee name Worley Printing			
Amount (\$) 1544.73		Payee address; City; State; Zip Code 3217 N IH 35 Austin, TX 78722			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Mailer		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Laura Pressley		Office sought City Council District <u>4</u> Office held	
Date 11-21-2014		Payee name Clean Water Action			
Amount (\$) 2000.00		Payee address; City; State; Zip Code 600 W 28th St #202 Austin TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Joint Ad		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Ed Scruggs/Jimmy Flannigan		Office sought City Council District 8 & 6 Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 11/21/2014		5 Payee name Clean Water Action			
6 Amount (\$) 2000.00		7 Payee address; City; State; Zip Code 600 w 28th St Austin TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Joint Ad		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Ed Scruggs & Jimmy Flannigan		Office sought City Council District 8 & 6	
Date 11-24-2014		Payee name Austin Chronicle			
Amount (\$) 1172.00		Payee address; City; State; Zip Code PO Box 49066 Austin, TX 78765			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Debate Ad		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Mike Martinez		Office sought Mayor	
Date 11-24-2014		Payee name Lisa Kirkpatrick			
Amount (\$) 200.00		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Art/Design Chronicle Ad		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Mike Martinez		Office sought Mayor	
				Office held City Council	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense.
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 12-02-2014		5 Payee name Austin Chronicle			
6 Amount (\$) 2114.00		7 Payee address; City; State; Zip Code 4000 N IH 35 Austin, TX 78751			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Labor Rally Martinez		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Mike Martinez		Office sought Mayor Office held City Council	
Date 12-02-2014		Payee name Kelly Graphics			
Amount (\$) 4915.28		Payee address; City; State; Zip Code 1409 Quaker Ridge Austin TX 78746			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing & Postage		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Ellen Troxclair		Office sought City Council District 8 Office held	
Date 12-02-2014		Payee name Kelly Graphics			
Amount (\$) 4470.72		Payee address; City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing & Postage		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Don Zimmerman		Office sought City Council District 6 Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 12-04-2014		5 Payee name Worker Defense Action Fund			
6 Amount (\$) 1250.00		7 Payee address; City; State; Zip Code 5604 Manor Road Austin, TX 78723			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Canvassing for Mike Martinez		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Mike Martinez		Office sought Mayor Office held City Council	
Date 12-04-2014		Payee name Workers Defense Action Fund			
Amount (\$) 1250.00		Payee address; City; State; Zip Code 5604 Manor Road Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Canvassing for Sabino Renteria		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sabino Renteria		Office sought City Council District 3 Office held	
Date 12-08-2014		Payee name Kelly Graphics			
Amount (\$) 3528.72		Payee address; City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing & Postage		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Don Zimmerman		Office sought City Council District 6 Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 12-04-2014		5 Payee name Clean Water Action			
6 Amount (\$) 1000.00		7 Payee address; City; State; Zip Code 600 West 28th St Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Social Media		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Mike Martinez		Office sought Mayor Office held CC At large	
Date 12-09-2014		Payee name Austin Chronicle			
Amount (\$) 9514.00		Payee address; City; State; Zip Code PO Box 49066 Austin, TX 78765			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) 10-1 Candidate Run Off Ad		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name 10-1 Candidates Run Off		Office sought Mayor and City Council Office held	
Date 12-12-2014		Payee name AFSCME Polling Center			
Amount (\$) 2262.80		Payee address; City; State; Zip Code 1625 L Street NW Washington, DC 20036			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Phone Banking		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Mike Martinez		Office sought Mayor Office held City Council At large	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 12-12-2014		5 Payee name AFSCME Polling Center			
6 Amount (\$) 232.74		7 Payee address; City; State; Zip Code 1625 L Street NW Washington DC 200326			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Phone Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Ora Houston		Office sought City Council District 1	
Date 12-17-2014		Payee name Austin Chronicle			
Amount (\$) 1366.40		Payee address; City; State; Zip Code PO Box 49066 Austin, TX 78765			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) 10-1 Candidate Congrats Ad		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name 10-1 Candidates		Office sought Mayor and City Council	
Date 12-12-2014		Payee name AFSCME Polling Center			
Amount (\$) 148.79		Payee address; City; State; Zip Code 1625 L Street NW Washington, DC 20036			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Phone Banking		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Sabino Renteria		Office sought City Council District 3	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers)	
4 Date 12-12-2014		5 Payee name AFSCME Polling Center			
6 Amount (\$) 124.96		7 Payee address; City; State; Zip Code 1625 L Street NW Washington DC 200326			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Phone Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Greg Casar		Office sought City Council District 4	
Date 12-12-2014		Payee name AFSCME Polling Center			
Amount (\$) 197.00		Payee address; City; State; Zip Code 1625 L St NW Washington, DC 20036			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Phone Banking		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Jimmy Flannigan		Office sought City Council District 6	
Date 12-12-2014		Payee name AFSCME Polling Center			
Amount (\$) 289.61		Payee address; City; State; Zip Code 1625 L Street NW Washington, DC 20036			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Phone Banking		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Leslie Pool		Office sought City Council District 7	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME Austinites for Equity	3 Filer ID (Ethics Commission Filers)
4 Date 12-12-2014	5 Payee name AFSCME Polling Center	
6 Amount (\$) 631.04	7 Payee address; City; State; Zip Code 1625 L Street NW Washington DC 200326	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Phone Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <div>Candidate / Officeholder name Ed Scruggs</div> <div>Office sought City Council District 8</div> <div>Office held</div> </div>	
Date 12-12-2014	Payee name AFSMCE Polling Center	
Amount (\$) 713.05	Payee address; City; State; Zip Code 1625 L St NW Washington, DC 20036	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Phone Banking	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <div>Candidate / Officeholder name Mandy Dealey</div> <div>Office sought City Council District : 10</div> <div>Office held</div> </div>	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH <div style="display: flex; justify-content: space-between;"> <div>Candidate / Officeholder name</div> <div>Office sought</div> <div>Office held</div> </div>	

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