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

Austin United PAC

4 TREASURER NAME

Derek Ensign

Date Received

**DCC RECEIVED AT
OCT 8 '19 PM 3:59**

5 ORIGINAL REPORT TYPE

- [ ] January 15
- [ ] July 15
- [✓] 30th day before election
- [ ] 8th day before election
- [ ] Runoff
- [ ] 10th day after campaign treasurer termination
- [ ] Dissolution Report
- [ ] Other (specify _____

Date Hand-delivered or Date Postmarked

Receipt #	Amount $

6 ORIGINAL PERIOD COVERED

Month Day Year   Month Day Year
07 / 09 / 2019 THROUGH 09 / 26 / 2019

Date Processed

Date Imaged

7 EXPLANATION OF CORRECTION

Error of recorded expenditure

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 _____, 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   Title of officer administering oath

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

CORRECTION/AMENDMENT AFFIDAVIT
FOR POLITICAL COMMITTEE

All Reports: A filer who files a corrected report must submit a correction affidavit. The affidavit must identify the information that has changed.

Reports filed with Texas Ethics Commission: A corrected report (other than a report due 8 days before an election or a special report near election) filed with the Ethics Commission after its due date is not considered late for purposes of late-filing penalties if: (1) any error or omission in the report as originally filed was made in good faith, and (2) the person filing the report files a corrected report and a good-faith affidavit not later than the 14th business day after the date the person learns that the report as originally filed is inaccurate or incomplete.

Semiannual Reports: Effective September 1, 2011, a semiannual report (due January 15 or July 15) that is amended/corrected <u>before</u> the eighth day after the original report was filed is considered to have been filed on the date the original report was filed. A semiannual report that is amended/corrected <u>on or after</u> the eighth day after the original report was filed is considered to have been filed on the date the original report was filed if: (1) the amendment/correction is made before any complaint is filed with regard to the subject of the amendment/correction; and (2) the original report was made in good faith and without intent to mislead or misrepresent the information contained in the report.

Attach additional pages as necessary.

INSTRUCTIONS FOR COMPLETING THIS FORM
The following numbers correspond to the numbered boxes on the other side.

1. Filer ID. If you file with the Ethics Commission, you should have received a letter acknowledging receipt of your campaign treasurer appointment and assigning you an Filer ID. Put that number in this box. If you do not file with the Ethics Commission, skip this box.

2. Total Pages Filed. After completing this form and any attachments, count the number of pages. Enter that number in this box. Each side of a two-sided form counts as a page. In other words, this form is two pages.

3. Committee Name. Put the committee's full name here. Enter your name in the same way as on the report you are correcting.

4. Treasurer Name. Put the treasurer's full name here.

5. Original Report Type. Mark the type of report you are correcting.

6. Original Period Covered. Enter the period covered by the report you are correcting. The year is important because filers sometimes correct reports years after filing the original.

7. Explanation of Correction. Attach any part of the campaign finance report form needed to report and explain corrections. Explain why there was an error on the original report. Also explain what information is being corrected and how the new information is different from the information on the original report. (Use additional pages if you need more space.) You may also use this area to request a waiver or reduction of a late-filing penalty and state the basis of your request.

8. Affidavit. Read the affidavit before signing. You must sign the affidavit in the presence of an individual authorized to take oaths. If signed before a notary public, the affidavit must include the notary's signature and seal.

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

2 Total pages filed:
8

3 COMMITTEE NAME
Austin United PAC

4 COMMITTEE ADDRESS

[X] Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
3110 Manor Rd Ste H

Austin, TX 78723

5 CAMPAIGN TREASURER NAME

MS / MRS / MR   FIRST   MI

Derek

NICKNAME   LAST   SUFFIX

Ensign

6 CAMPAIGN TREASURER STREET ADDRESS
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE);   APT / SUITE #;   CITY;   STATE;   ZIP CODE

4710 Santa Anna St.   Austin   TX   78721

7 CAMPAIGN TREASURER MAILING ADDRESS

[ ] Change of Address

STREET OR PO BOX;   APT / SUITE #;   CITY;   STATE;   ZIP CODE

8 CAMPAIGN TREASURER PHONE

AREA CODE   PHONE NUMBER   EXTENSION

512   925-1839

9 REPORT TYPE

[ ] January 15

[ ] July 15

[X] 30th day before election

[ ] 8th day before election

[ ] Runoff

[ ] Exceeded $500 Limit

[ ] Dissolution (Attach PAC-DR)

[ ] 10th day after campaign treasurer termination

10 PERIOD COVERED

Month   Day   Year
07/09/2019   THROUGH

Month   Day   Year
09/26/2019

11 ELECTION

ELECTION DATE
Month   Day   Year
11/05/2019

ELECTION TYPE
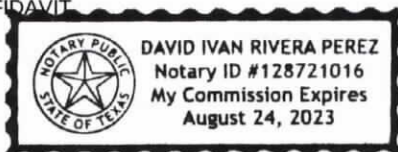[ ] Primary   [ ] Runoff   [ ] Other
[X] General   [ ] Special

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID
Austin United PAC	

14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME
(Attach lists on plain paper to complete this report if necessary.)	☐ Candidate	
	☐ Officeholder	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

		BALLOT IDENTIFICATION / #	ELECTION DATE
☐ SUPPORT (Candidate or Measure)		Prop A	Month Day Year
☒ OPPOSE (Candidate or Measure)			11/05/2019
☐ ASSIST (Officeholder)	☒ Measure	DESCRIPTION Austin Voter Approval for Sports and Entertainment Venue Construction on City Land	

15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$	$0.00
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$	$50,070.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$	$0.00
	4. **TOTAL POLITICAL EXPENDITURES**	$	$23,664.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$	$26,341.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$	$0.00

16 AFFIDAVIT

DAVID IVAN RIVERA PEREZ
Notary ID #128721016
My Commission Expires
August 24, 2023

AFFIX NOTARY STAMP / SEAL ABOVE

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

Sworn to and subscribed before me, by the said _Derek Paul Ensign_ , this the __8__ day of _October_ , 20 _19_ , to certify which, witness my hand and seal of office.

_____	_David I Rivera Perez_	_Notary Public_
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

17 COMMITTEE NAME	**18** Filer ID
Austin United PAC	

19 SCHEDULE SUBTOTALS

NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. ☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$	50,070.00
2. ☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$	
3. ☐ SCHEDULE B: PLEDGED CONTRIBUTIONS	$	
4. ☐ SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$	
5. ☐ SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$	
6. ☐ SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$	
7. ☐ SCHEDULE E: LOANS	$	
8. ☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$	23,664.00
9. ☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$	
10. ☐ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	$	
11. ☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$	
12. ☐ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$	
13. ☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$	
14. ☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule A1: Sch: 1/2 Rpt: 4/8

2 FILER NAME

Austin United PAC

3 Filer ID

4 Date 08/16/2019	**5** Full name of contributor ☐ out-of-state PAC (ID#:_____) Austin TeamCo LLC	**7** Amount of Contribution ($) $50,000.00
	6 Contributor address; City; State; Zip Code 1835-A Kramer Lane Ste 600 Austin, TX 78758	

8 Principal occupation / Job title (See Instructions) | **9** Employer (See Instructions)

Date 09/25/2019	Full name of contributor ☐ out-of-state PAC (ID#:_____) Brandenburg, Kollin	Amount of Contribution ($) $16.11
	Contributor address; City; State; Zip Code 1813 Richwood Dr Austin, TX 78757	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date 09/26/2019	Full name of contributor ☐ out-of-state PAC (ID#:_____) Cotham, Landon	Amount of Contribution ($) $10.84
	Contributor address; City; State; Zip Code 2814 Norfolk Dr Austin, TX 78745	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date 09/25/2019	Full name of contributor ☐ out-of-state PAC (ID#:_____) Ensign, Derek	Amount of Contribution ($) $10.84
	Contributor address; City; State; Zip Code 4710 Santa Anna St Austin, TX 78721	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date 09/25/2019	Full name of contributor ☐ out-of-state PAC (ID#:_____) Rubio, Jorge	Amount of Contribution ($) $21.37
	Contributor address; City; State; Zip Code 1855 County Road 200 Liberty Hill, TX 78642	

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The **Instruction Guide** explains how to complete this form.

1	Total pages Schedule A1:
	Sch: 2/2 Rpt: 5/8

2 FILER NAME

Austin United PAC

3 Filer ID

4 Date
09/25/2019

5 Full name of contributor ☐ out-of-state PAC (ID#:_____)

Urban, Andrew

6 Contributor address; City; State; Zip Code

3908 Greenmountain Ln

Austin, TX 78759

7 Amount of Contribution ($)

$10.84

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

POLITICAL EXPENDITURES 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: Sch: 1/3 Rpt: 6/8	2 FILER NAME Austin United PAC		3 Filer ID

4 Date 09/26/2019	5 Payee name Donateway

6 Amount ($) $5.00	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703

8 **PURPOSE OF EXPENDITURE**	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Fundraising site fee

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date 08/30/2019	Payee name Frost Bank

Amount ($) $9.00	Payee address; City; State; Zip Code P.O. Box 1600 San Antonio, TX 78296

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Banking fee

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date 08/30/2019	Payee name Texas Democratic Party

Amount ($) $3,800.00	Payee address; City; State; Zip Code PO Box 116 Austin, TX 78767

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Voter Data	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense VAN access/ subscription

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES 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
Sch: 2/3 Rpt: 7/8	Austin United PAC	

4 Date	5 Payee name
08/19/2019	Thompson & Knight LLP

6 Amount ($)	7 Payee address; City; State; Zip Code
$6,000.00	98 San Jacinto Blvd
	Ste 1900
	Austin, TX 78701

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Legal Services	☐ Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense
		Legal consulting

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
09/16/2019	Thompson & Knight LLP

Amount ($)	Payee address; City; State; Zip Code
$3,850.00	98 San Jacinto Blvd
	Ste 1900
	Austin, TX 78701

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Legal Services	☐ Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense
		Legal consulting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

Date	Payee name
08/30/2019	Y Strategy

Amount ($)	Payee address; City; State; Zip Code
$5,000.00	3110 Manor Rd
	Ste H
	Austin, TX 78723

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	Consulting Expense	☐ Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense
		Political consulting

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID
Sch: 3/3 Rpt: 8/8	Austin United PAC	

4 Date	5 Payee name
09/25/2019	Y Strategy

6 Amount ($)	7 Payee address; City; State; Zip Code
$5,000.00	3110 Manor Rd Ste H Austin, TX 78723

8 **PURPOSE OF EXPENDITURE**	**(a)** Category (See Categories listed at the top of this schedule) Consulting Expense	**(b)** Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Political consulting

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH

Candidate/Officeholder name	Office sought	Office held