Report of Direct Campaign Expenditures:ATX.1 COVERSHEET

COVERSHEET					
1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 9			
	LAST; SUFFIX		ACCOUNT #		
	Texas Freedom Network		00090569		
			OFFICE (JSE ONLY	
2 INDIVIDUAL OR ORGANIZATION ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; ST PO Box 1624	ATE; ZIP CODE	Date Received ELECTRONICA 05/03/2021	ALLY FILED	
	Austin, TX 78767		Receipt #		
	(CHECK IF FILER'S HOME ADDRESS)		HD / PM	Amount	
3 INDIVIDUAL FILER EMPLOYER & OCCUPATION	FILER OCCUPATION FILER EMP	PLOYER	Date Processed		
4 COMMITTEE TREASURER NAME	TITLE; FIRST; MI; LAST; SUFFIX		Date Imaged		
5 COMMITTEE TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; ST	ATE; ZIP CODE			

Expenditure					FORM ATX1EXPEND	
1 FILER NAME		2 FILER ID			3 Total pages Schedule ATX8EXPEND:	
Texas Freedom Netwo	ork	00090569			Sch: 1/7 Rpt: 2/9	
					561. 1/1 Npt. 2/5	
4 PAYEE NAME	LAST FIRST MI The Movement C	Cooperative				
5 PAYEE ADDRESS	Payee address;	apartment/suit#;	City;	State; Zip	Code	
	PO BOX 20063					
		ARE STATION 4 EAS	ST 27TH S	TREET		
	New York, NY 10	0001				
6 EXPENDITURE	(a) Category			(b) Description		
DETAILS	Other			Text and pl	none banking fees	
	(c) Date 05/01/2021			(d) Amount (\$) \$2,003.37		
				ΦΖ,003.31		
7 Complete ONLY if	(a) Candidate/Offic	eholder name		(b) Ballot measu	ire supported/opposed	
candidate or ballot measure			Title			
suported/opposed						
				X (CHECK IF BALLOT MEASURE) Proposition B		
				ιορο		
				OPPC)SF	
	(c) Office sought			(d) Office held		
	_ I					

Expenditure				FORM ATX1EXPEND
1 FILER NAME		2 FILER ID		3 Total pages Schedule ATX8EXPEND:
Texas Freedom Netwo	ик	00090569		Sch: 2/7 Rpt: 3/9
4 PAYEE NAME	LAST FIRST MI Facebook			
5 PAYEE ADDRESS	Payee address; 1 Hacker Way Menlo Park, CA	apartment/suit#; City;	State; Zip	o Code
6 EXPENDITURE DETAILS	(a) Category Advertising Ex		(b) Description	
	(c) Date 05/01/2021		(d) Amount (\$) \$207.95	
7 Complete <u>ONLY</u> if candidate or ballot measure suported/opposed	(a) Candidate/Offic	eholder name uffix; FirstName; Title	X (CHEC Propo OPPo	
	(c) Office sought		(d) Office held	

Expenditure FORM ATX1EXPEND 1 FILER NAME 2 FILER ID 3 Total pages Schedule ATX8EXPEND: 00090569 **Texas Freedom Network** Sch: 3/7 Rpt: 4/9 4 PAYEE NAME LAST FIRST MI TriNet HR III, Inc apartment/suit#; State; Zip Code Payee address; City; 5 PAYEE ADDRESS 1 Park Place Suite 600 Dublin, CA 94568-7983 6 EXPENDITURE (a) Category (b) Description DETAILS Salaries/Wages/Contract Labor (c) Date (d) Amount (\$) 05/01/2021 \$169.37 Complete <u>ONLY</u> if candidate or ballot 7 (a) Candidate/Officeholder name (b) Ballot measure supported/opposed measure LastName; Suffix; FirstName; Title suported/opposed χ (CHECK IF BALLOT MEASURE) Proposition B OPPOSE (c) Office sought (d) Office held

Expenditure					FORM ATX1EXPEND	
1 FILER NAME		2 FILER ID			3 Total pages Schedule ATX8EXPEND:	
Texas Freedom Netwo	rk	00090569			Sch: 4/7 Rpt: 5/9	
4 PAYEE NAME	LAST FIRST MI The Movement C	Cooperative				
5 PAYEE ADDRESS	Payee address;	apartment/suit#;	City;	State; Zip	Code	
	PO BOX 20063					
		ARE STATION 4 EAS	T 27TH S	TREET		
	New York, NY 10	0001				
6 EXPENDITURE	(a) Category			(b) Description		
DETAILS	Other			Text and phone banking fees		
	(c) Date 05/01/2021			(d) Amount (\$)		
	02/01/2021			\$0.07		
7 Complete ONLY if	(a) Candidate/Offic			(h) Ballot measu	ure supported/opposed	
candidate or ballot measure			「itle	(b) Dunot mouse		
suported/opposed	Lastivanie, C.	JIIIA, Firstiviano, r	lue			
				X (CHECK IF BALLOT MEASURE) Proposition C		
				Propo	sition C	
				SUDD		
				SUPP	ORI	
	(c) Office sought			(d) Office held		

Expenditure					FORM ATX1EXPEND
1 FILER NAME Texas Freedom Netwo	ر اس.	2 FILER ID 00090569			3 Total pages Schedule ATX8EXPEND:
Texas Fleedoni Netwo	IK	00090509			Sch: 5/7 Rpt: 6/9
4 PAYEE NAME	LAST FIRST MI (see previous)	1		•	
5 PAYEE ADDRESS	Payee address;	apartment/suit#; C	City;	State; Zip	Code
6 EXPENDITURE DETAILS	(a) Category		(b)	Description	
	(c) Date		(d) /	Amount (\$)	
7 Complete <u>ONLY</u> if candidate or ballot measure suported/opposed		eholder name uffix; FirstName; Titl		X (CHECk	ure supported/opposed K IF BALLOT MEASURE) sition C PORT
	(c) Office sought		(d)	Office held	
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Expenditure				FORM ATX1EXPEND	
				-	
1 FILER NAME Texas Freedom Netwo				3 Total pages Schedule ATX8EXPEND:	
TEXAS FIEEdoni Netwo	ſΚ	00090569		Sch: 6/7 Rpt: 7/9	
4 PAYEE NAME	LAST FIRST MI Facebook			<u> </u>	
5 PAYEE ADDRESS		apartment/suit#; City;	State; Zip	Code	
	1 Hacker Way Menlo Park, CA	04025			
6 EXPENDITURE	(a) Category	94025	(b) Description		
DETAILS	Advertising Ex	kpense	(b) Description		
	(c) Date 05/01/2021		(d) Amount (\$)		
	02/01/2021		\$213.27		
7 Complete <u>ONLY</u> if candidate or ballot	(a) Candidate/Offic		(b) Ballot meas	sure supported/opposed	
measure suported/opposed	LastName; Suffix; FirstName; Title		χ (CHECK IF BALLOT MEASURE)		
			Proposition C		
			SUPF	PORT	
	(c) Office sought		(d) Office held		

Expenditure FORM ATX1EXPEND 1 FILER NAME 2 FILER ID 3 Total pages Schedule ATX8EXPEND: 00090569 **Texas Freedom Network** Sch: 7/7 Rpt: 8/9 4 PAYEE NAME LAST FIRST MI TriNet HR III, Inc apartment/suit#; State; Zip Code Payee address; City; 5 PAYEE ADDRESS 1 Park Place Suite 600 Dublin, CA 94568-7983 6 EXPENDITURE (a) Category (b) Description DETAILS Salaries/Wages/Contract Labor (c) Date (d) Amount (\$) 05/01/2021 \$84.35 Complete <u>ONLY</u> if candidate or ballot 7 (a) Candidate/Officeholder name (b) Ballot measure supported/opposed measure LastName; Suffix; FirstName; Title suported/opposed χ (CHECK IF BALLOT MEASURE) Proposition C SUPPORT (c) Office sought (d) Office held

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.

Texas Freedom Network

Signature of Filer