

# Report of Direct Campaign Expenditures:ATX.1 COVERSHEET

1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 10	
	LAST; SUFFIX Capital Area Progressive Democrats	ACCOUNT # 00090920	
	<div>OFFICE USE ONLY</div>		
2 INDIVIDUAL OR ORGANIZATION ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 413  Austin, TX 78767	Date Received ELECTRONICALLY FILED 10/24/2022	
	<input type="checkbox"/> (CHECK IF FILER'S HOME ADDRESS)	Receipt #	
		HD / PM	Amount
3 INDIVIDUAL FILER EMPLOYER & OCCUPATION	FILER OCCUPATION	FILER EMPLOYER	
4 COMMITTEE TREASURER NAME	TITLE; FIRST; MI; LAST; SUFFIX		Date Processed
			Date Imaged
5 COMMITTEE TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
6 MEMO			

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Capital Area Progressive Democrats		<b>2</b> FILER ID 00090920	<b>3</b> Total pages Schedule ATX1EXPEND:  Sch: 1/6 Rpt: 2/10
<b>4</b> MEMO			
<b>5</b> PAYEE NAME	LAST FIRST MI The Austin Chronicle		
<b>6</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code  4000 N. IH-35   Austin, TX 78751		
<b>7</b> EXPENDITURE DETAILS	<b>(a)</b> Category Advertising Expense	<b>(b)</b> Description	
	<b>(c)</b> Date 10/21/2022	<b>(d)</b> Amount (\$) \$1,345.00	
<b>8</b> Complete <u>ONLY</u> if candidate or ballot measure supported/opposed	<b>(a)</b> Candidate/Officeholder name LastName; Suffix; FirstName; Title  Watson Kirk	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought Mayor	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Capital Area Progressive Democrats		<b>2</b> FILER ID 00090920	<b>3</b> Total pages Schedule ATX1EXPEND:  Sch: 2/6 Rpt: 3/10
<b>4</b> MEMO			
<b>5</b> PAYEE NAME	LAST FIRST MI (see previous)		
<b>6</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code		
<b>7</b> EXPENDITURE DETAILS	<b>(a)</b> Category	<b>(b)</b> Description	
	<b>(c)</b> Date	<b>(d)</b> Amount (\$)	
<b>8</b> Complete <u>ONLY</u> if candidate or ballot measure suported/opposed	<b>(a)</b> Candidate/Officeholder name  LastName; Suffix; FirstName; Title  Harper- Natasha	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought  Council Member, District 1	<b>(d)</b> Office held  Council Member, District 1	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Capital Area Progressive Democrats		<b>2</b> FILER ID 00090920	<b>3</b> Total pages Schedule ATX1EXPEND:  Sch: 3/6 Rpt: 4/10
<b>4</b> MEMO			
<b>5</b> PAYEE NAME	LAST FIRST MI (see previous)		
<b>6</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code		
<b>7</b> EXPENDITURE DETAILS	<b>(a)</b> Category	<b>(b)</b> Description	
	<b>(c)</b> Date	<b>(d)</b> Amount (\$)	
<b>8</b> Complete <u>ONLY</u> if candidate or ballot measure suported/opposed	<b>(a)</b> Candidate/Officeholder name  LastName; Suffix; FirstName; Title  Craig Ken	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought  Council Member, District 5	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Capital Area Progressive Democrats		<b>2</b> FILER ID 00090920	<b>3</b> Total pages Schedule ATX1EXPEND:  Sch: 4/6 Rpt: 5/10
<b>4</b> MEMO			
<b>5</b> PAYEE NAME	LAST FIRST MI (see previous)		
<b>6</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code		
<b>7</b> EXPENDITURE DETAILS	<b>(a)</b> Category	<b>(b)</b> Description	
	<b>(c)</b> Date	<b>(d)</b> Amount (\$)	
<b>8</b> Complete <u>ONLY</u> if candidate or ballot measure suported/opposed	<b>(a)</b> Candidate/Officeholder name  LastName; Suffix; FirstName; Title  Ellis Paige	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought  Council Member, District 8	<b>(d)</b> Office held  Council Member, District 8	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Capital Area Progressive Democrats		<b>2</b> FILER ID 00090920	<b>3</b> Total pages Schedule ATX1EXPEND:  Sch: 5/6 Rpt: 6/10
<b>4</b> MEMO			
<b>5</b> PAYEE NAME	LAST FIRST MI (see previous)		
<b>6</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code		
<b>7</b> EXPENDITURE DETAILS	<b>(a)</b> Category	<b>(b)</b> Description	
	<b>(c)</b> Date	<b>(d)</b> Amount (\$)	
<b>8</b> Complete <u>ONLY</u> if candidate or ballot measure suported/opposed	<b>(a)</b> Candidate/Officeholder name  LastName; Suffix; FirstName; Title  Guerrero Linda	<b>(b)</b> Ballot measure supported/opposed  (CHECK IF BALLOT MEASURE)	
	<b>(c)</b> Office sought  Council Member, District 9	<b>(d)</b> Office held	

# Expenditure

FORM **ATX1EXPEND**

<b>1</b> FILER NAME Capital Area Progressive Democrats		<b>2</b> FILER ID 00090920	<b>3</b> Total pages Schedule ATX1EXPEND:  Sch: 6/6 Rpt: 7/10
<b>4</b> MEMO			
<b>5</b> PAYEE NAME	LAST FIRST MI (see previous)		
<b>6</b> PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code		
<b>7</b> EXPENDITURE DETAILS	<b>(a)</b> Category	<b>(b)</b> Description	
	<b>(c)</b> Date	<b>(d)</b> Amount (\$)	
<b>8</b> Complete <u>ONLY</u> if candidate or ballot measure suported/opposed	<b>(a)</b> Candidate/Officeholder name  LastName; Suffix; FirstName; Title	<b>(b)</b> Ballot measure supported/opposed  X (CHECK IF BALLOT MEASURE) Proposition A  SUPPORT	
	<b>(c)</b> Office sought	<b>(d)</b> Office held	

# Contribution

**FORM ATX1CONTRIB**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule ATX1: Sch: 1/2 Rpt: 8/10
<b>2</b> FILER NAME Capital Area Progressive Democrats		<b>3</b> Filer ID (Ethics Commission Filers) 00090920
<b>4</b> MEMO		
<b>5</b> Date 09/01/2022	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agnew, Virginia <b>7</b> Contributor address; City; State; Zip Code 1204 Castle Hill St Austin, TX 78703	<b>8</b> Amount of Contribution (\$) \$500.00
<b>9</b> Principal occupation / Job title (See Instructions) N/A		<b>10</b> Employer (See Instructions) Not Employed
Date 09/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Andy (The Honorable) Contributor address; City; State; Zip Code 6000 Lonesome Valley Trl Austin, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Travis County Judge
Date 09/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark Meachum, Amy (The Honorable) Contributor address; City; State; Zip Code 3900 Sidehill Path Austin, TX 78731	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 09/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deseta Lyttle, Daniella Contributor address; City; State; Zip Code 1811 W. Ben White Blvd Ste. 101 Austin, TX 78704	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Lyttle Law Firm PLLC
Date 10/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KPW PAC Contributor address; City; State; Zip Code 4017 Avenue H Austin, TX 78751	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# Contribution

FORM **ATX1CONTRIB**

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

**1** Total pages Schedule ATX1:  
Sch: 2/2 Rpt: 9/10

**2** FILER NAME

Capital Area Progressive Democrats

**3** Filer ID (Ethics Commission Filers)  
00090920

**4** MEMO

**5** Date  
09/15/2022

**6** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Needles, Tamara (The Honorable)

**7** Contributor address; City; State; Zip Code  
P.O. Box 160881  
  
Austin, TX 78716

**8** Amount of Contribution (\$)  
  
\$500.00

**9** Principal occupation / Job title (See Instructions)  
Judge

**10** Employer (See Instructions)  
State of Texas

Date  
09/19/2022

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Price, Velva (The Honorable)

Contributor address; City; State; Zip Code  
1601 Ridgemont Dr  
  
Austin, TX 78723

Amount of Contribution (\$)  
  
\$500.00

Principal occupation / Job title (See Instructions)  
District Clerk

Employer (See Instructions)  
Travis County

# 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.

Capital Area Progressive Democrats

Signature of Filer