FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00090451 3 COMMITTEE NAME **OFFICE USE ONLY** Austin Firefighters Public Safety Fund Date Received **ELECTRONICALLY FILED** 10/27/2022 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 7537 Cameron Road Change of Address Austin, TX 78752 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Gregory NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Pope CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 9621 Cooper Creek Drive STREET **ADDRESS** 2402 (Residence or Business) Austin, TX 78729 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** MAILING **ADDRESS** Change of Address TX **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 626-0173 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 December 5 September 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 09/26/2022 10/25/2022

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID (Ethics Commiss	sion Filers)
Austin Firefighters Pu	ublic Safety Fund		00090451	
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location)	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	3. Officeholders	Natasha Harpe	r-Madison Council Member, District 1	
	Assisted (Identify by name or, if applicable, classify by party.)	'	,	
5 CONTRIBUTION TOTALS	PLEDGES, LOANS,	POLITICAL CONTRIBUTIONS (COOR GUARANTEES OF LOANS) qualifies for the higher itemization thres	 \$	0.00
	2. TOTAL POLITICA	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES	\$ OF LOANS)	165,000.00
EXPENDITURE TOTALS	`	EXPENDITURES OF \$10 OR LESS	,	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	95,522.88
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED A G PERIOD		114,218.55
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING REPORTING PERIOD	LOANS AS OF THE \$	0.00
6 AFFIDAVIT			<u> </u>	
			nder penalty of perjury, that the accompanying repincludes all information required to be reported bion Code.	
			Gregory Pope	
			Signature of Campaign Treasurer	
AFFIX NOTAI	RY STAMP / SEAL ABOVE			
	ped before me, by the said		, this the (day
Sworn to and subscrib				
	, 20, to certify v	vhich, witness my hand and seal o	f office.	
	, 20, to certify \	vhich, witness my hand and seal o	f office.	
	, 20, to certify \	vhich, witness my hand and seal o	f office.	

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

2 COMMITTEE NAME				13 Filor ID	Page 3 of 15 (Ethics Commission Filers)
2 COMMITTEE NAME	Cofot / Fried			13 Filer ID	(Ethics Commission Filers)
ustin Firefighters Public S	Safety Fund			00090451	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
	nature of issues,	B. Opposed			
	Officeholders Assisted (Identify by name or, if		Paige Ellis Council Member, Di	strict 8	
	applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Ken Craig Council Member, Dis	strict 5	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jose Velasquez Council Membro	er, District 3	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				

FORM MPAC MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 4 of 15 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) Austin Firefighters Public Safety Fund 00090451 14 COMMITTEE 1. Candidates A. Supported Kirk Watson Mayor ACTIVITY (Identify by name or, if applicable, classify by party.) (Attach lists on plain paper to complete this report if necessary.) B. Opposed A. Supported 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3 5 of 15

			5 of 15
TEE NAME	18 Filer ID	(Ethics Comm	nission Filers)
refighters Public Safety Fund	00090451		
	•	SUBTO	TAL AMOUNT
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	165,000.00
SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$	
SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$		
SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	\$		
SCHEDULE E: LOANS	\$	0.00	
SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	IS	\$	95,522.88
SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00	
SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	\$		
13. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	\$		
SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	ILE SUBTOTALS F SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS RETURNED	INTERIOR CONTRIBUTIONS SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE C1: MONETARY CONTRIBUTIONS SCHEDULE C2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTION OR LABOR ORGANIZATION SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C5: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C5: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C5: LOANS SCHEDULE C5: UNPAID INCURRED OBLIGATIONS SCHEDULE C5: UNPAID INCURRED OBLIGATIONS SCHEDULE C5: UNPAID INCURRED OBLIGATIONS SCHEDULE C6: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE C6: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS FROM POLITICAL CONTRIBUTIONS SCHEDULE C6: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS FROM POLITICAL CONTRIBUTIONS SCHEDULE C6: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS FROM POLITICAL CONTRIBUTIONS SCHEDULE C7: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS FROM POLITICAL CONTRIBUTIO

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 1/1 Rpt: 6/15	
2	FILER NAME Austin Firefi	ghters Public Safety Fund		3	Filer ID (Ethics Commission Filers) 00090451
4				7	Amount of Contribution (\$) \$90,000.00
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Date 10/17/2022	Full name of contributor out-of-state PAC (ID#:_ Austin Firefighters PAC Contributor address; City; State; Zip Code 7537 Cameron Road Austin, TX 78752			Amount of Contribution (\$) \$75,000.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)	

PLE	DGED CONTRIBU	TIONS				SCHEDULE B
The Instruction Guide explains how to complete this form.				1	Total pages Sch Sch: 1/1 Rpt:	
2 FILER N	IAME Firefighters Public Safety Fun	d		3		thics Commission Filers)
4 TOTAL	OF UNITEMIZED PLEDO	GES			\$	0.00
5 Date	6 Full name of pledgor	out-of-state PAC (ID#	:)	8	Amount of pledge (\$)	9 In-kind description (If applicable)
	7 Pledgor Address;	City; State; Zip Code			_	
10 Princina	l occupation / Job title (See Instru	ıctions)	11 Employer (See Instr	L		tside of Texas. Complete Schedule T
20 i illioipa	r oodapaaon / oob aao (ooo moar	20110110)	Limployer (See Insu	ucii	ons)	

LC	DANS					SCHE	OULE E
The	Instructio	n Guide explains h	ow to complete this	form.	1	pages Schedule E: L/1 Rpt: 8/15	
	R NAME tin Firefighte	rs Public Safety Fund			3 Filer ID 00090) (Ethics Commiss)451	on Filers)
4 TO	TAL OF UN	IITEMIZED LOANS			•	\$	0.00
5 Date	of loan	7 Name of lender	out-of-state PA	AC (ID#:		9 Loan Amount	(\$)
finar	nder a ncial nution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12 Princ	cipal occupatio	on / Job title (See Instructi	ions)	13 Employer (See Instruction	ns)		
_	cription of Coll None	ateral		15 Check if personal funds v	vere deposite	ed into political accou (See Instructio	
	RANTOR DRMATION	17 Name of guarantor		·		19 Amount Guara	inteed (\$)
	not applicable	18 Guarantor address;	City; State;	Zip Code			
20 Princ	cipal occupation	on		21 Employer (See Instruction	ns)	1	

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

	The Instruction Guide explains h	ow to complete this form.
1 Total pages Schedule F1: Sch: 1/7 Rpt: 9/15	FILER NAME Austin Firefighters Public Safety Fund	3 Filer ID (Ethics Commission Filers) 00090451
4 Date 10/14/2022	5 Payee name Bank of America	1
6 Amount (\$) \$15.00	7 Payee address; City; State; 701 E. Stassney Lane	Zip Code
Expenditure from corporate funds	Austin, TX 78745	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Accounting/Banking	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Banking Fees - Wire Transfer Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		ffice sought Office held
Date 09/28/2022	Payee name Goss, Delwin	
Amount (\$) \$3,780.00	Payee address; City; State; 6410 Ponca Street	Zip Code
Expenditure from corporate funds	Austin, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract Labor to install and takedown 4 x 8 political signs for Ellis and Harper-Madison campaigns
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ffice sought Office held ouncil Member, District 1 Place Council Member, District 1
Date	Payee name (see previous)	
Amount (\$) Expenditure from corporate funds	Payee address; City; State;	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sched	dule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ffice sought Office held ouncil Member, District 8 Place Council Member, District 8

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/7 Rpt: 10/15	Austin Firefighters Public Safety Fund	00090451
4 Date	5 Payee name	
10/14/2022	Goss, Delwin	
6 Amount (\$) \$1,320.00	7 Payee address; City; State; Zip C 6410 Ponca Street	code
Expenditure from corporate funds	Austin, TX 78741	r
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contract labor to install and takedown 4 x 8 political signs for Velasquez and Craig campaigns
9 Complete ONLY if direct	Candidate/Officeholder name Office so	_
expenditure to benefit C/O	¹ Velasquez, Jose Council	Member, District 3 Place
Date	Payee name (see previous)	
Amount (\$) Expenditure from corporate funds	Payee address; City; State; Zip C	code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office so Craig, Ken Council	Dught Office held Member, District 5 Place
Date	Payee name	
10/18/2022	Meta	
Amount (\$) \$900.00	Payee address; City; State; Zip C 1 Hacker Way	Code
Expenditure from corporate funds	Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising expense for Watson and Craig campaigns
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office so Craig, Ken Council	ought Office held Member, District 5 Place

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By Contributions/ Officials Indicated Contributions/ Contributi

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 3/7 Rpt: 11/15	Austin Firefighters Public Safety Fund 00090451	
4 Date	5 Payee name	
	(see previous)	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
Expenditure from corporate funds		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H Watson, Kirk Mayor Place Austin District	
Date	Payee name	=
10/20/2022	Meta	
		_
Amount (\$)	Payee address; City; State; Zip Code	
\$900.00	1 Hacker Way	
Expenditure from		
corporate funds	Menlo Park, CA 94025	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Advertising expense for Watson and Craig	
	campaigns	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	H Craig, Ken Council Member, District 5 Place	
Date	Payee name	=
Daic	(see previous)	
Amount (\$)	Payee address; City; State; Zip Code	
Expenditure from		
corporate funds		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
		_

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/7 Rpt: 12/15	Austin Firefighters Public Safety Fund	00090451
4 Date	5 Payee name	<u> </u>
10/24/2022	Meta	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$900.00	1 Hacker Way	
Expenditure from corporate funds	Menlo Park, CA 94025	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Advertising Expense for Watson and Craig
		campaigns
9 Complete ONLY if direct	Candidate/Officeholder name Office so	I ught Office held
expenditure to benefit C/OI		Member, District 5 Place
Date		<u>·</u>
Date	Payee name (see previous)	
A		
Amount (\$)	Payee address; City; State; Zip C	ode
Expenditure from		
corporate funds		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder name Office so	ıght Office held
expenditure to benefit C/OI	11	lace Austin District
Date	Payee name	
10/25/2022	Meta	
Amount (\$)	Payee address; City; State; Zip Ci	nde
\$900.00	1 Hacker Way	
Ψ333.00		
Expenditure from corporate funds	Menlo Park, CA 94025	
		[#\ 5 \ · ·
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		Advertising Expense for Craig and Watson
		campaigns
Complete ONLY if direct	Candidate/Officeholder name Office so	
expenditure to benefit C/OI	H Craig, Ken Council	Member, District 5 Place

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee 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

Credit Card Payment	The Instruction Guide explains I	how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/7 Rpt: 13/15	Austin Firefighters Public Safety Fund	00090451
4 Date	5 Payee name	•
	(see previous)	
6 Amount (\$)	7 Payee address; City; State;	Zip Code
Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this school	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Office sought Office held Mayor Place Austin District
Date	Payee name	
10/14/2022	Stackadapt	
Amount (\$) \$85,000.00 Expenditure from corporate funds	Payee address; City; State; 100 University Avenue Floor 5 Toronto Ontario M5J1V6 Canada	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Advertising expense for Watson, Harper, Ellis, Craig and Velasquez campaigns
Complete ONLY if direct expenditure to benefit C/OI		Office sought Office held Council Member, District 1 Place Council Member, District 1
Date	Payee name (see previous)	
Amount (\$) Expenditure from corporate funds	Payee address; City; State;	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche	edule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Office sought Office held Council Member, District 8 Place Council Member, District 8

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1: Sch: 6/7 Rpt: 14/15	FILER NAME Austin Firefighters Public Safety Fund	3 Filer ID (Ethics Commission Filers) 00090451
4 Date	5 Payee name (see previous)	·
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
Expenditure from corporate funds		,
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H Craig, Ken Council	Member, District 5 Place
Date	Payee name (see previous)	
Amount (\$)	Payee address; City; State; Zip C	Code
Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so Velasquez, Jose Council	Member, District 3 Place
Date	Payee name (see previous)	
Amount (\$)	Payee address; City; State; Zip C	Code
Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H Watson, Kirk Mayor F	ought Office held Place Austin District

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

The Instruction Guide explains how 2 FILER NAME	3 Filer ID (Ethics Commission Filers)
2 FILER NAME	13 Filer ID (Etnics Commission Filers)
Austin Firefighters Public Safety Fund	00090451
5 Pavee name	<u> </u>
Worley Printing	
7 Payee address; City; State; Z	ip Code
3217 N Interstate 35	
Frontage Road	
Austin, 1X 78722	_
(a) Category (See Categories listed at the top of this schedu	
Printing Expense	Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Printing Expense for 4 x 8 political signs for Jose Velasquez campaign
	e sought Office held
¬ Velasquez, Jose Cou	ıncil Member, District 3 Place
	7 Payee address; City; State; Z 3217 N Interstate 35 Frontage Road Austin, TX 78722 (a) Category (See Categories listed at the top of this schedule Printing Expense Candidate/Officeholder name Office