

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) 00090449		2 Total pages filed: 9	
3 COMMITTEE NAME Austinites for Equity				OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/31/2022 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1812 Centre Creek Dr Suite 310 Austin, TX 78754			
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Jack NICKNAME LAST SUFFIX Kirfman			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1812 Centre Creek Dr Suite 310 Austin, TX 78754			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1812 Centre Creek Dr Suite 310 Austin, TX 78754			
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (512) 658-4892			
9 REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> July 15 <input checked="" 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 07/01/2022 THROUGH 10/29/2022			
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 11/08/2022 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			

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SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **SPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Austinites for Equity		13 Filer ID (Ethics Commission Filers) 00090449	
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input checked="" type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate <input checked="" type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME The Honorable Natasha Harper-Madison	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Council Member, District 1	
	<input type="checkbox"/> Measure	BALLOT IDENTIFICATION / # <div style="float: right; text-align: right;"> ELECTION DATE Month Day Year </div>	
		DESCRIPTION	
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED		\$ 0.00
EXPENDITURE TOTALS	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 8,020.00
CONTRIBUTION BALANCE	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$ 0.80
OUTSTANDING LOAN TOTALS	4. TOTAL POLITICAL EXPENDITURES		\$ 7,767.20
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 1,627.65	
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00	

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.		
AFFIX NOTARY STAMP / SEAL ABOVE	Jack Kirfman _____ 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 oath	_____ Title of officer administering oath

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE

FORM SPAC
ADDENDUM

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12 COMMITTEE NAME Austinites for Equity		13 Filer ID (Ethics Commission Filers) 00090449	
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input checked="" type="checkbox"/> ASSIST (Officeholders only)	<input type="checkbox"/> CANDIDATE <input checked="" type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME The Honorable Paige Ellis	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Council Member, District 8	
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION ELECTION DATE MONTH DAY YEAR	
		DESCRIPTION	
COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME Linda Guerrero	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Council Member, District 9	
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION ELECTION DATE MONTH DAY YEAR	
		DESCRIPTION	
COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input checked="" type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME Ken Craig	
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Council Member, District 5	
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION ELECTION DATE MONTH DAY YEAR	
		DESCRIPTION	

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE

FORM SPAC
ADDENDUM

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12 COMMITTEE NAME Austinites for Equity		13 Filer ID (Ethics Commission Filers) 00090449
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input checked="" type="checkbox"/> CANDIDATE	CANDIDATE / OFFICE HOLDER NAME Jose Velasquez
	<input type="checkbox"/> OFFICE HOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Council Member, District 3
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION ELECTION DATE MONTH DAY YEAR
		DESCRIPTION
COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input checked="" type="checkbox"/> CANDIDATE	CANDIDATE / OFFICE HOLDER NAME The Honorable Kirk Watson
	<input type="checkbox"/> OFFICE HOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) Mayor
	<input type="checkbox"/> MEASURE	BALLOT IDENTIFICATION ELECTION DATE MONTH DAY YEAR
		DESCRIPTION

SUBTOTALS - SPAC**FORM SPAC**
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17 COMMITTEE NAME Austinites for Equity	18 Filer ID (Ethics Commission Filers) 00090449
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19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 8,020.00
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 CORPORATION OR LABOR ORGANIZATION	\$
7. <input type="checkbox"/> SCHEDULE E: LOANS	\$
8. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 7,767.20
9. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14. <input type="checkbox"/> 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: 1/1 Rpt: 6/9
2 FILER NAME Austinites for Equity		3 Filer ID (Ethics Commission Filers) 00090449
4 Date 08/15/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Netscher, Frank <hr/> 6 Contributor address; City; State; Zip Code 1711 E. 16th St. Austin, TX 78702	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Netscher, Frank <hr/> Contributor address; City; State; Zip Code 1711 E. 16th St. Austin, TX 78702	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VOTE PAC <hr/> Contributor address; City; State; Zip Code 3571 Far West Blvd. PMB 149 Austin, TX 78731	Amount of Contribution (\$) \$8,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

POLITICAL EXPENDITURES 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: Sch: 1/3 Rpt: 7/9	2 FILER NAME Austinites for Equity	3 Filer ID (Ethics Commission Filers) 00090449
4 Date 10/18/2022	5 Payee name Austin Chronicle	
6 Amount (\$) \$1,266.40	7 Payee address; City; State; Zip Code PO Box 4189 Austin, TX 78765	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print advertisement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Harper-Madison, Natasha (The	Office sought Council Member, District 1 Office held Council Member, District 1
Date	Payee name (see previous)	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) 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 Ellis, Paige (The Honorable)	Office sought Council Member, District 8 Office held Council Member, District 8
Date	Payee name (see previous)	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) 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 Guerrero, Linda	Office sought Council Member, District 9 Office held

POLITICAL EXPENDITURES 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: Sch: 2/3 Rpt: 8/9	2 FILER NAME Austinites for Equity	3 Filer ID (Ethics Commission Filers) 00090449
4 Date	5 Payee name (see previous)	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(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 Craig, Ken	Office sought Council Member, District 5 Office held
Date	Payee name (see previous)	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) 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 Velasquez, Jose	Office sought Council Member, District 3 Office held
Date	Payee name (see previous)	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) 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 Watson, Kirk (The Honorable)	Office sought Mayor Office held

POLITICAL EXPENDITURES 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: Sch: 3/3 Rpt: 9/9	2 FILER NAME Austinites for Equity	3 Filer ID (Ethics Commission Filers) 00090449
4 Date 10/11/2022	5 Payee name Stand Together Austin	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 3110 Manor Rd., Ste. H Austin, TX 78723	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Watson, Kirk (The Honorable)	Office sought Mayor Office held
Date 10/12/2022	Payee name Texas Vote Environment	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 600 West 28th St. #202 Austin, TX 78705	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Craig, Ken	Office sought Council Member, District 5 Office held