FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00090790 3 COMMITTEE NAME **OFFICE USE ONLY** City Accountability Project Date Received **ELECTRONICALLY FILED** 10/31/2022 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 5802 Lookout Mountain Dr Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78731 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Laura NAME NICKNAME LAST **SUFFIX** Cantu-Templeton STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 5802 Lookout Mountain Dr STREET **ADDRESS** (Residence or Business) Austin, TX 78731 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS** TX Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 826-0571 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff Year 10 PERIOD Month Day Year Day Month **COVERED THROUGH** 09/30/2022 10/29/2022 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/08/2022 χ General Special

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Version V3.4.82538023

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 File	er ID	(Ethics Commission Filers)
City Accountability Pro	oject		000	90790	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Aaron Webmar	n Council Member, D	istrict 5	
(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 B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
15 CONTRIBUTION TOTALS	PLEDGES, LOANS,	POLITICAL CONTRIBUTIONS (IDENTIFICATIONS) Qualifies for the higher itemization thres		\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEE	ES OF LOANS)	\$	2,500.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL E	XPENDITURES OF \$100 OR LES	SS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	13,029.89
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	ONTRIBUTIONS MAINTAINED A PERIOD	AS OF THE LAST DAY	\$	41,307.13
OUTSTANDING LOAN TOTALS		MOUNT OF ALL OUTSTANDING REPORTING PERIOD	G LOANS AS OF THE	\$	0.00
16 AFFIDAVIT		I swear, or affirm, u true and correct and under Title 15, Elec	nder penalty of perjury, t d includes all information tion Code.	hat the ac required	ecompanying report is to be reported by me
			Signature of Campaigr	n Treasure	er
AFFIX NOTAR	Y STAMP / SEAL ABOVE				
Sworn to and subscribe	d before me, by the said		, this the		day
of	, 20, to certify \	hich, witness my hand and seal c	of office.		
Signature of officer a	dministering oath	Printed name of officer administer	ing oath Titl	e of office	er administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC **ADDENDUM**

							Page 3 of 7
12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	City Accountability Proje	ect				00090790	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Richard Smith (Council Member,	District 8	
	(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	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Linda Guerrero	Council Member	, District 9	
	(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				
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	Paige Ellis Cou	ncil Member, Dis	trict 8	
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
		applicable, classily by party.)					

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			4 of 7
17 COMMITTEE NAME City Accountability Project		18 Filer ID 00090790	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICA	L CONTRIBUTIONS		\$ 2,500.00
2. SCHEDULE A2: NON-MONETARY (IN-	KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUT	IONS		\$
4. SCHEDULE C1: MONETARY CONTRIB ORGANIZATION	UTIONS FROM CORPORATION OR LABO	PR	\$
5. SCHEDULE C2: NON-MONETARY (IN-I	KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	\$
6. SCHEDULE C3: MONETARY SUPPOR	FROM CORPORATION OR LABOR ORG.	ANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUP ORGANIZATION	PORT FROM CORPORATION OR LABOR		\$
8. SCHEDULE D: PLEDGED CONTRIBUT	IONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9. SCHEDULE E: LOANS			\$
10. X SCHEDULE F1: POLITICAL EXPENDIT	URES FROM POLITICAL CONTRIBUTIONS	S	\$ 13,029.89
11. SCHEDULE F2: UNPAID INCURRED O	BLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVES	TMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13. SCHEDULE F4: EXPENDITURES MADE	E BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLITICAL EXPEND	DITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15. SCHEDULE K: INTEREST, CREDITS, G. TO FILER	AINS, REFUNDS, AND CONTRIBUTIONS I	RETURNED	\$

	MONETA	ARY POLITICAL CONTRIBUTION	ONS		SCHE	DUL	LE A1
	The Instruction Guide explains how to complete this form.				Total pages Schedule Sch: 1/1 Rpt: 5/7	41:	
2	FILER NAME City Accountability Project			3	Filer ID (Ethics Commo0090790	nissio	on Filers)
4	Date 10/07/2022 5 Full name of contributor out-of-state PAC (ID#:) Bailey, Linda 6 Contributor address; City; State; Zip Code 4104 Turkey Creek Dr Austin, TX 78730			7	Amount of Contribution	(\$)	\$500.00
8	Principal occup Retired	oation / Job title (See Instructions)	Employer (See Instructions Retired	5)			
	Date 10/20/2022	Full name of contributor out-of-state PAC (ID#:_ Butts, George Contributor address; City; State; Zip Code 4702 Valley Oak Dr Austin, TX 78731			Amount of Contribution	(\$)	\$500.00
	Principal occup Lawyer	oation / Job title (See Instructions)	Employer (See Instructions Retired	5)			
	Date 10/21/2022	Full name of contributor out-of-state PAC (ID#:_ Reese, Jason Contributor address; City; State; Zip Code 2405 West 9th Austin, TX 78703)		Amount of Contribution	(\$)	\$1,500.00
	Principal occup Investor	oation / Job title (See Instructions)	Employer (See Instructions Self	s)			

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 1/2 Rpt: 6/7	City Accountability Project 00090790
4 Date	5 Payee name
10/29/2022	Anedot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$20.30	1340 Poydras Street
Expenditure from	Ste 1770
corporate funds	New Orleans, LA 70112
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Payment Processor
	T dyment i recessor
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/20/2022	Austin Texas Print
Amount (\$)	Payee address; City; State; Zip Code
\$12,752.48	6448 E Hwy 290
Expenditure from	Ste. 102
corporate funds	Austin, TX 78723
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Mail
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/29/2022	Facebook
Amount (\$)	Payee address; City; State; Zip Code
\$154.33	1 Hacker Way
Expenditure from corporate funds	Menlo Park, CA 94025
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Digital Ads
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

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

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)

Credit Card Payment The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 2/2 Rpt: 7/7	City Accountability Project	00090790				
4 Date	5 Payee name	•				
10/28/2022	Google					
6 Amount (\$)	7 Payee address; City; State; Zip Co	de				
\$18.40	1600 Amphitheatre Parkway					
Expenditure from corporate funds	Mountain View, CA 94043					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
OF EXPENDITURE	Domain / Email	Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense Domain / Email				
		Domain / Email				
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held				
expenditure to benefit C/O		g Sinde Hold				
Date	Davise name					
10/29/2022	Payee name Google					
Amount (\$)	Payee address; City; State; Zip Co	de				
\$84.38	1600 Amphitheatre Parkway					
Expenditure from corporate funds	Mountain View, CA 94043					
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 Digital Ads				
		Digital / tas				
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	aht Office held				
expenditure to benefit C/O		giit Cilioc Hold				