

Report of Direct Campaign Expenditures:ATX.1 COVERSHEET

1 INDIVIDUAL OR ORGANIZATION NAME	TITLE; FIRST; MI	PAGE # 8	
	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	Date Received ELECTRONICALLY FILED 11/04/2022	
	Austin, TX 78767	Receipt #	
	<input type="checkbox"/> (CHECK IF FILER'S HOME ADDRESS)	HD / PM	Amount
		Date Processed	
3 INDIVIDUAL FILER EMPLOYER & OCCUPATION	FILER OCCUPATION FILER EMPLOYER	Date Imaged	
4 COMMITTEE TREASURER NAME	TITLE; FIRST; MI; LAST; SUFFIX		
5 COMMITTEE TREASURER ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
6 MEMO			

Expenditure

FORM **ATX1EXPEND**

1 FILER NAME Capital Area Progressive Democrats		2 FILER ID 00090920	3 Total pages Schedule ATX1EXPEND: Sch: 1/6 Rpt: 2/8
4 MEMO			
5 PAYEE NAME	LAST FIRST MI The Austin Chronicle		
6 PAYEE ADDRESS	Payee address; apartment/suit#; City; State; Zip Code 4000 N. IH-35 Austin, TX 78751		
7 EXPENDITURE DETAILS	(a) Category Advertising Expense	(b) Description	
	(c) Date 11/04/2022	(d) Amount (\$) \$1,345.00	
8 Complete <u>ONLY</u> if candidate or ballot measure suported/opposed	(a) Candidate/Officeholder name LastName; Suffix; FirstName; Title Watson Kirk	(b) Ballot measure supported/opposed (CHECK IF BALLOT MEASURE)	
	(c) Office sought Mayor	(d) Office held	

Expenditure

FORM **ATX1EXPEND**

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

Expenditure

FORM **ATX1EXPEND**

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

Expenditure

FORM **ATX1EXPEND**

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

Expenditure

FORM **ATX1EXPEND**

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

Expenditure

FORM **ATX1EXPEND**

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

Capital Area Progressive Democrats

Signature of Filer