

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090717	2 Total pages filed: 13	
3 COMMITTEE NAME Equity PAC			OFFICE USE ONLY	
			Date Received ELECTRONICALLY FILED 12/05/2022	
			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 PO Box 300812 Austin, TX 78703			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Kathleen			
	NICKNAME LAST SUFFIX Mitchell			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1403 Ulit Ave Austin, TX 78702			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE TX			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 695-4670			
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input checked="" type="checkbox"/> Runoff			
10 PERIOD COVERED	Month Day Year 10/05/2022 THROUGH Month Day Year 12/03/2022			
11 ELECTION	ELECTION DATE Month Day Year 12/13/2022		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Equity PAC		13 Filer ID (Ethics Commission Filers) 00090717	
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Celia Isreal Mayor	
		B. Opposed	
	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.)		
	15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	534.74
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	37,832.72
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	119,451.31
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

16 AFFIDAVIT		
<p>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.</p>		
<p style="text-align: right;">Kathleen Mitchell _____ Signature of Campaign Treasurer</p>		
<p>AFFIX NOTARY STAMP / SEAL ABOVE</p>		
<p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p>		
<p>_____ Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath</p>		

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 13

17 COMMITTEE NAME Equity PAC		18 Filer ID (Ethics Commission Filers) 00090717
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 534.74
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 C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 37,832.72
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<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: 1/2 Rpt: 4/13
2 FILER NAME Equity PAC		3 Filer ID (Ethics Commission Filers) 00090717
4 Date 12/02/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Doris (Dee) <hr/> 6 Contributor address; City; State; Zip Code 2904 ZEKE BND AUSTIN, TX 78745	7 Amount of Contribution (\$) \$26.63
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) N/A
Date 12/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Janet <hr/> Contributor address; City; State; Zip Code 8205 Briarwood Lane Austin, TX 78757	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) State of TX
Date 12/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Ken <hr/> Contributor address; City; State; Zip Code 7100 Whispering Oaks Dr, Austin TX 78745 Austin, TX 78745	Amount of Contribution (\$) \$10.84
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) City of Austin
Date 12/03/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Noelle <hr/> Contributor address; City; State; Zip Code 5705 Cedardale Dr Austin, TX 78745	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Love & Relationship Coach		Employer (See Instructions) Self
Date 12/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downing, Carolyn <hr/> Contributor address; City; State; Zip Code 9600 Sawyer Fay Lane Austin, TX 78748	Amount of Contribution (\$) \$26.63
Principal occupation / Job title (See Instructions) Retired teacher		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/13
2 FILER NAME Equity PAC		3 Filer ID (Ethics Commission Filers) 00090717
4 Date 12/01/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaebler, Helen <hr/> 6 Contributor address; City; State; Zip Code 504 HARRIS AVENUE Austin, TX 78705	7 Amount of Contribution (\$) \$105.58
8 Principal occupation / Job title (See Instructions) attorney		9 Employer (See Instructions) University of Texas Austin
Date 12/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grove, Lexie <hr/> Contributor address; City; State; Zip Code 2105 E 22nd St B Austin, TX 78722	Amount of Contribution (\$) \$52.95
Principal occupation / Job title (See Instructions) Postdoctoral Fellow		Employer (See Instructions) University of Texas at Austin
Date 12/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lazar, Beverly <hr/> Contributor address; City; State; Zip Code 1000 Liberty Park Drive #104 Austin, TX 78746	Amount of Contribution (\$) \$21.37
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) AISD
Date 12/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roehm, Elizabeth <hr/> Contributor address; City; State; Zip Code 1703 Cliffside Dr Austin, TX 78704	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) parent		Employer (See Instructions) none
Date 12/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsukahara, Roberta <hr/> Contributor address; City; State; Zip Code 4117 Berkman Dr Austin, TX 78723	Amount of Contribution (\$) \$105.58
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

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: 1/8 Rpt: 6/13	2 FILER NAME Equity PAC	3 Filer ID (Ethics Commission Filers) 00090717
4 Date 12/01/2022	5 Payee name Austin Chronicle	
6 Amount (\$) \$1,545.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4000 N. IH-35 Austin, TX 78751	
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 Advertising
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/13/2022	Candidate/Officeholder name Payee name Haynie + Co	
Amount (\$) \$1,650.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8303 N Mopac Expy Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/18/2022	Candidate/Officeholder name Payee name Haynie + Co	
Amount (\$) \$235.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8303 N Mopac Expy Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 2/8 Rpt: 7/13	2 FILER NAME Equity PAC	3 Filer ID (Ethics Commission Filers) 00090717
4 Date 11/18/2022	5 Payee name Haynie + Co	
6 Amount (\$) \$550.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 8303 N Mopac Expy Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/18/2022	Candidate/Officeholder name Payee name Haynie + Co	
Amount (\$) \$1,475.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8303 N Mopac Expy Austin, TX 78759	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/31/2022	Candidate/Officeholder name Payee name Hernandez, Laura	
Amount (\$) \$1,343.17 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6000 Lonesome Valley Trail Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Manager
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 3/8 Rpt: 8/13	2 FILER NAME Equity PAC	3 Filer ID (Ethics Commission Filers) 00090717
4 Date 11/14/2022	5 Payee name Hernandez, Laura	
6 Amount (\$) \$1,343.17 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6000 Lonesome Valley Trail Austin, TX 78731	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Manager
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/29/2022	Candidate/Officeholder name Hernandez, Laura	
Amount (\$) \$1,343.17 <input type="checkbox"/> Expenditure from corporate funds	Office sought 6000 Lonesome Valley Trail Austin, TX 78731	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Manager
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/31/2022	Candidate/Officeholder name IRS	
Amount (\$) \$1,583.79 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. Box 409101 Ogden, UT 84409	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tax
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 4/8 Rpt: 9/13	2 FILER NAME Equity PAC	3 Filer ID (Ethics Commission Filers) 00090717
4 Date 11/14/2022	5 Payee name IRS	
6 Amount (\$) \$1,568.79 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 409101 Ogden, UT 84409	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tax
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/29/2022	Candidate/Officeholder name Office sought Office held	
Payee name IRS		
Amount (\$) \$1,098.25 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 409101 Ogden, UT 84409	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tax
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/29/2022	Candidate/Officeholder name Office sought Office held	
Payee name Just Housing		
Amount (\$) \$9,995.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 66066 Austin, TX 78766	
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 Accounting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 5/8 Rpt: 10/13	2 FILER NAME Equity PAC	3 Filer ID (Ethics Commission Filers) 00090717
4 Date 10/31/2022	5 Payee name Latham, Braden	
6 Amount (\$) \$2,238.71 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 711 Hyde Park Crt Austin, TX 78748	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Organizing Director
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/14/2022	Candidate/Officeholder name Latham, Braden	
Amount (\$) \$2,238.71 <input type="checkbox"/> Expenditure from corporate funds	Office sought 711 Hyde Park Crt Austin, TX 78748	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Organizing Director
Office held		
Date 10/17/2022	Candidate/Officeholder name Mitchell, Kathy	
Amount (\$) \$100.35 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO Box 13551 Austin, TX 78711	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Reimb
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: 6/8 Rpt: 11/13	2 FILER NAME Equity PAC	3 Filer ID (Ethics Commission Filers) 00090717
4 Date 10/17/2022	5 Payee name Mitchell, Kathy	
6 Amount (\$) \$33.13 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 13552 Austin, TX 78711	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Copies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/17/2022	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$24.99 <input type="checkbox"/> Expenditure from corporate funds	Payee name Mitchell, Kathy Payee address; City; State; Zip Code PO Box 13553 Austin, TX 78711	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense URL Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/31/2022	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$2,411.83 <input type="checkbox"/> Expenditure from corporate funds	Payee name Mitchell, Kathy Payee address; City; State; Zip Code PO Box 13551 Austin, TX 78711	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Director
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 7/8 Rpt: 12/13	2 FILER NAME Equity PAC	3 Filer ID (Ethics Commission Filers) 00090717
4 Date 11/14/2022	5 Payee name Mitchell, Kathy	
6 Amount (\$) \$2,411.83 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 13551 Austin, TX 78711	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Director
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/29/2022	Candidate/Officeholder name Office sought Office held	
Payee name Mitchell, Kathy		
Amount (\$) \$2,411.83 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 13551 Austin, TX 78711	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Director
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/13/2022	Candidate/Officeholder name Office sought Office held	
Payee name Savoie, Seneca		
Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 9620 covey ridge lane Austin, TX 78758	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 Consulting Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 8/8 Rpt: 13/13	2 FILER NAME Equity PAC	3 Filer ID (Ethics Commission Filers) 00090717
4 Date 10/17/2022	5 Payee name USPS PO BOXES	
6 Amount (\$) \$156.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1914 E 6th St Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 USPS PO BOXES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2022	Payee name Worley	
Amount (\$) \$75.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held