GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission 00090993	n Filers)	2 Total pages filed: 7		
3	COMMITTEE NAME		1		OFFICE USE ONLY		
	Austin Progressive	Coalition Political Action Committee					
	Ū						
					ELECTRONICALLY FILED		
					04/28/2023		
4	COMMITTEE ADDRESS		TY; STATE;	ZIP CODE			
	ABBRECC	6112 Highlandale Dr			Date Hand-delivered or Date Postmarked		
	Change of Address						
		Austin, TX 78731			Receipt # Amount		
					Date Processed		
					Date Imaged		
5	CAMPAIGN	MS/MRS/MR FIRST			MI		
	TREASURER	Ann M.					
	NAME						
		NICKNAME LAST			SUFFIX		
		Denkler					
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE)	APT / S	SUITE #; CITY;	STATE; ZIP CODE		
	TREASURER	6112 Highlandale Drive		,	- ,		
	STREET ADDRESS						
	(Residence or Business)	ALISTIN TY 70721					
<u> </u>	· · ·	AUSTIN, TX 78731					
7	CAMPAIGN TREASURER	STREET OR PO BOX;	APT	/ SUITE #; CITY;	STATE; ZIP CODE		
	MAILING						
	ADDRESS						
	Change of Address	тх					
8	CAMPAIGN AREA CODE PHONE NUMBER EXTENSION						
	TREASURER	(512) 905-2992					
	PHONE						
9	REPORT	January 15	Oth day before election	ı Г	Dissolution (Attach PAC-DR)		
	TYPE						
		X 8	h day before election		10th day after campaign treasurer termination		
			unoff				
10	PERIOD	Month Day Year		Month Day	Year		
1.0	COVERED	-	HROUGH	04/26/2023			
				0 1/20/2020			
11	ELECTION	ELECTION DATE		ELECTION TYPE			
		Month Day Year	Primary	Runoff	Other		
		05/06/2023	General	X Special			
			Serierai	X Special			
⊢							
	GO TO PAGE 2						
L							
For	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.4.3551aa27						

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID	(Ethics Commission Filers)					
Austin Progressive Coa	00090993						
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)						
(Attach lists on plain paper to complete this report if necessary.)	paper to complete this B. Opposed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported Ballot ID:Prop A Election Date:2	2023-05-06 De	esc:Police Oversight			
		B. Opposed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
15 CONTRIBUTION TOTALS	PLEDGES, LOANS,	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS) qualifies for the higher itemization threshold	\$	785.02			
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,570.04			
EXPENDITURE TOTALS	3. TOTAL POLITICAL E	EXPENDITURES OF \$100 OR LESS, UNLESS ITEM	1IZED \$	735.02			
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,470.04			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	DAY \$	50.00				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL / LAST DAY OF THE F	HE \$	0.00				
16 AFFIDAVIT	•		I				
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.							
		A M	Dealder				
	Ann M. Denkler Signature of Campaign Treasurer						
AFFIX NOTARY STAMP / SEAL ABOVE							
Sworn to and subscribed	is the	day					
of	_, 20, to certify v	vhich, witness my hand and seal of office.					
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of office	r administering oath			
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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC

					Page 3 of 7
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Austin Progressive Coa	alition Political Action	Committee		00090993	
14 COMMITTEE ACTIVITY	1. 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			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed	Ballot ID:Prop B Election Date:20	023-05-06 Desc	::Police Oversight
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3 4 of 7

17 COMMITT	(Ethics	Commission Filers)				
Austin Progressive Coalition Political Action Committee 00090993 19 SCHEDULE SUBTOTALS						
19 SCHEDUL NAME OF	SUBTOTAL AMOUNT					
1. X	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS					
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$			
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$			
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$			
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$			
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$			
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$			
9. X	SCHEDULE E: LOANS		\$	0.00		
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	1,470.04		
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$			
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 **1** Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/7 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Austin Progressive Coalition Political Action Committee 00090993 4 Date Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: 7 04/20/2023 \$785.02 **Central Austin Democrats** 6 Contributor address; City; State; Zip Code 6112 Highlandale Drive AUSTIN, TX 78731 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)

LOANS							SCH	EDULE E
The Instruction Guide explains how to complete this form					iges Schedule E 1 Rpt: 6/7			
2 FILER NAME Austin Progressi	ve Coalition Political A	ction Committe	ee			3 Filer ID 000909	(Ethics Comm	ission Filers)
⁴ TOTAL OF UN	ITEMIZED LOANS						\$	0.00
5 Date of loan	7 Name of lender	0	out-of-state PA	C (ID#:)	9 Loan Amou	nt (\$)
6 Is lender a financial institution?	8 Lender address;	City;	State;	Zip Code			10 Interest Rat	
				-			11 Maturity Da	le
12 Principal occupatio	on / Job title (See Instruct	ions)		13 Employer (See Ins	structions	5)		
14 Description of Coll	ateral			15 Check if personal	funds we	ere deposited	t into political ac (See Instrue)	
16 GUARANTOR INFORMATION	17 Name of guarantor						19 Amount Gu	aranteed (\$)
not applicable	18 Guarantor address;	City;	State;	Zip Code				
20 Principal occupatio	n			21 Employer (See Ins	structions	3)	1	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Pinting Expense Travel Out of District Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule F1: Sch: 1/1 Rpt: 7/7	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Austin Progressive Coalition Political Action Committee 00090993			
4 Date				
4 Date 04/26/2023	5 Payee name Worley Printing			
6 Amount (\$) \$735.02	7 Payee address; City; State; Zip Code 3217 N IH-35			
Expenditure from corporate funds	Austin, TX 78722			
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Doorhangers 			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			