CORRECTION/AMENDMENT AFFIDAVIT FORM COR-PAC FOR POLITICAL COMMITTEE Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00038708 Date Received COMMITTEE TFN PAC **ELECTRONICALLY FILED** NAME 11/27/2023 TREASURER Chiarello, Stephanie NAME Date Hand-delivered or Date Postmarked **ORIGINAL** January 15 Runoff REPORT TYPE Receipt # Amount July 15 10th day after campaign treasurer resignation 30th day before election Dissolution report Date Processed 8th day before election Other (specify) ORIGINAL PERIOD Month Day Year Month Year Day Date Imaged **COVERED THROUGH** 01/01/2023 06/30/2023 **EXPLANATION OF CORRECTION** Non-monetary support incorrectly filed in Schedule C2; corrected to Schedule C4 8 AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. Stephanie Chiarello Signature of Campaign Treasurer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said ____, this the ____ _____, 20_____, to certify which, witness my hand and seal of office.

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

Printed name of officer administering oath

Signature of officer administering oath

Title of officer administering oath

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) 00038708 3 COMMITTEE NAME **OFFICE USE ONLY TFN PAC** Date Received **ELECTRONICALLY FILED** 11/27/2023 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 1624 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78767 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Stephanie NAME NICKNAME LAST **SUFFIX** Chiarello STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 608 W. 22nd St. STREET **ADDRESS** (Residence or Business) Austin, TX 78765 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** P.O. Box 1624 MAILING **ADDRESS** Austin, TX 78767 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 322-0545 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2023 06/30/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Runoff Other Primary 05/06/2023 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME		13	Filer ID	(Ethics Commission Filers)
TFN PAC			00038708	3
1 COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported Ballot ID:null Election Date:2023-	05 06 Dog	cc:Equity Action ballot
	(Describe by date and location of election and nature of issue.)	initiative - Austin Police Oversigh		sc.Equity Action ballot
		B. Opposed		
	Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA		\$	3,638.91
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	10,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST DA	\Y \$	58,872.03
OUTSTANDING LOAN TOTALS	I	AMOUNT OF ALL OUTSTANDING LOANS AS OF TH REPORTING PERIOD	E \$	0.00
6 AFFIDAVIT	l			
		I swear, or affirm, under penalty of perju true and correct and includes all informa under Title 15, Election Code.		
		Stephanie 0		
		Signature of Camp	aign Treasi	urer
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said	, this	the	day
		which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of offi	cer administering oath

GENERAL-PURPOSE COMMITTEE REPORT:

FORM GPAC ADDENDUM

COMMITTEE NAME TEN PAC COMMITTEE ACTIVITY (Attach lists on plain paper to complete this) 13 Filer ID (Ethics Commission Filers) 00038708 A. Supported B. Opposed	PURPOSE			ADDENDOM
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted Describe by date and location of election and nature of ssue.) 3. Officeholders Assisted				Page 4 of 8
1. Candidates (Identify by name or, if applicable, classify by party.) [Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted A. Supported B. Opposed A. Supported B. Opposed B. Opposed A. Supported Ballot ID:null Election Date:2023-05-06 Desc:Sunrise El Paso Climate Charter B. Opposed	COMMITTEE NAME			
(Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported Ballot ID:null Election Date:2023-05-06 Desc:Sunrise El Paso Climate Charter B. Opposed 3. Officeholders Assisted	TFN PAC			 00038708
2. Measures (Describe by date and location of election and nature of issue.) A. Supported Ballot ID:null Election Date:2023-05-06 Desc:Sunrise El Paso Climate Charter B. Opposed 3. Officeholders Assisted	COMMITTEE ACTIVITY			
(Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	
3. Officeholders Assisted			A. Supported	-05-06 Desc:Sunrise El Paso Climate
Assisted			B. Opposed	
(dentify by name or, if applicable, classify by party.)		Assisted		
		(Identify by name or, if applicable, classify by party)		

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

				5 of 8
17 COM TFN	MITTE PAC	EE NAME	18 Filer ID 00038708	(Ethics Commission Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 25.00	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION)R	\$
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.	X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$ 3,613.91
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 10,000.00
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	\$

	MONEI	ARY POLITICAL CON	SCHEDULE A1						
	The Instru	ction Guide explains how to c	1	Total pages Schedule A1: Sch: 1/1 Rpt: 6/8					
2	FILER NAME TFN PAC					3 Filer ID (Ethics Commission Filers) 00038708			
4	Date 02/23/2023			7	Amount of Contribution (\$)	\$5.00			
0	Dringing ago	Austin, TX 78757	lo.	Employer (See Instructions					
8	Engineer	pation / Job title (See Instructions)	9	Employer (See Instructions Dell)				
	Date Full name of contributor [03/23/2023 DeMoss, Jeffrey Contributor address; City; State		out-of-state PAC (ID#:) e; Zip Code			Amount of Contribution (\$)	\$5.00		
	Principal occu	Austin, TX 78757 pation / Job title (See Instructions)	1	Employer (See Instructions)				
	Engineer	,		Dell	,				
	Date Full name of contributor out-of-state PAC (ID#:_04/23/2023 DeMoss, Jeffrey Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00		
		Austin, TX 78757							
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions Dell)				
	Date 05/23/2023	Full name of contributor on the contributor of contributor address; City; State; Zity; State; Zi	ut-of-state PAC (ID#: ip Code)		Amount of Contribution (\$)	\$5.00		
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions Dell)				
	Date Full name of contributor out-of-state PAC (ID#: 06/23/2023 DeMoss, Jeffrey Contributor address; City; State; Zip Code Austin, TX 78757)		Amount of Contribution (\$)	\$5.00			
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions Dell)				

NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C4

	The Instruction Guide explains how to complete this form.					1 Total pages Schedule C4: Sch: 1/1 Rpt: 7/8			
2	2 FILER NAME TFN PAC			3	Filer ID 00038708	(Ethics Commission Filers)			
4	Date 01/19/2023	5	Corporation / Labor Organization name Texas Freedom Network	6	Amount (\$)	341.12			
	Date 06/01/2023		Corporation / Labor Organization name Texas Freedom Network		Amount (\$)	3,000.00			
	Date 02/25/2023		Corporation / Labor Organization name Texas Freedom Network		Amount (\$)	272.79			

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outpers extrapply not listed above)

Candidate/Officeholder/Politica Credit Card Payment	al Committee	∍in/Awards/Memoriais Expense Legal Services	Salaries/W	ages/Contract Lab		OTHER (enter a	category not listed above)
•		The Instruction Guide ex	plains how to co	nplete this forn	n.		
1 Total pages Schedule F1:	2 FILER NAME				3	Filer ID	(Ethics Commission Filers)
Sch: 1/1 Rpt: 8/8	TFN PAC					00038708	
4 Date	5 Payee name				•		
04/20/2023	Equity Action	1					
6 Amount (\$)	7 Payee addres		State; Zip Co	40			
	-		State, Zip Co	ue			
\$5,000.00	PO Box 300	812					
Expenditure from							
corporate funds	Austin, TX 7	8703					
8 PURPOSE	(a) Category (See	e Categories listed at the top of	this schedule)	(b) Description	on		
OF	Political Con					de of Texas. Com	olete Schedule T.
EXPENDITURE				Check if	f Austin, TX,	officeholder living	expense
				Pledge p	payment	- FOR Prop	Α
9 Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ght		Office he	eld
expenditure to benefit C/O	Н						
Date	Payee name						
04/25/2023	1 -	ne Texas PAC					
			Ctata: 7in Ca	-1			
Amount (\$)	Payee addres		State; Zip Co	ue			
\$5,000.00	3500 Werne	r Ave					
Expenditure from							
corporate funds	Austin , TX 7	'8722					
PURPOSE	(a) Category (See	e Categories listed at the top of	this schedule)	(b) Description	on		
OF		- El Paso Prop K - C		Check if	f travel outsic	de of Texas. Com	olete Schedule T.
EXPENDITURE	Charter	·				officeholder living	· ·
				Contribu	ition - El	Paso Prop	K - Climate Charter
Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ght		Office he	eld
expenditure to benefit C/O	Н						