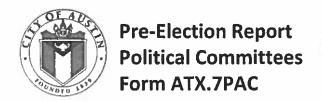


Use this form to report contributions received and expenditures made between the 9th day before the Election that have met the monetary thresholds identified in City Code 2-2-2966448944:54 instructions on how to complete this form, see the Pre-Election Report: Political Committees Instruction Guide

1		Committee Name*						
	COMMITTEE NAME	Austin Board of REALTORS P	AC					
2	COMMITTEE	Address/ PO Box 4800 Spicewood Springs Rd			Apa	rtment or Sui	te Number	
	ADDRESS	City Austin			Stat	e	Zip Code 78759	
3	COMMITTEE TREASURER NAME	Title First Name Ms Emily Nickname	Last Name			M	iddle Initial	Suffix
4	COMMITTEE TREASURER ADDRESS	Address/ PO Box 4800 Spicewood Springs Rd City Austin			Apa Stat	rtment or Sui	Zip Code	
5	REPORTING PERIOD	Start Date (yyyymmdd)* 20181028		THROUGH		End Date (yy 20181030	yymmdd)*	

^{*} Indicates a required field



6	SCHEDULES		Schedule ATX.7A - Pre-Election Report of Contributions
	ATTACHED		
	Check box for each form		Schedule ATX.7F - Pre-Election Report of Expenditures
	attached		

AFFIDAVIT

By signature below, I certify that the Pre-Election Report filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-29 for the reporting period indicated.

Signature of Affiant

Contribution



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

Itemize each contribution in Sections 1-3.
For additional contributions, click "Add Another Contribution Page" below.

* Indicates a required field

CONTRIBUTOR NAME Contributor is an individual	Contributor Title Contributor First Name* Organization Name or Contributor Last Name, as applicable*	Contributor Suffix
CONTRIBUTOR	Contributor Address/ PO Box*	Contributor Apartment or Suite Number
ADDRESS AND	Contributor City*	Contributor State* Contributor Zip Code*
EMPLOYER	Contributor Employer	Contributor Occupation
	Per City Code 2-2-29(d), employer and occupation are required	for individuals whose contribution is \$200 or more
CONTRIBUTION	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
DETAILS	In-Kind Contribution Description, if applicable	<u> </u>

Add Another Contribution Page



Expenditure

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

PAYEE NAME Payee is an Individual	Organization Name or Payee Last Name, as applicable* Kelly Graphics		
PAYEE ADDRESS	Payee Address/ PO Box* 1409 Quaker Ridge Payee City* Austin	Payee Apartment of Payee State*	Payee Zip Code*
3 EXPENDITURE DETAILS	Category* Printing Expense Description (If Category is "Other")	(\$) Expenditure Am \$9,528.66 Expenditure Date*	oount*

Add Another Expenditure Page

POLITICAL COMMITTEE FORM DAILY-E PAC DAILY PRE-ELECTION REPORT OF DIRECT EXPENDITURES

1	Filer ID (Ethics Con 00035370	nmission Filers)	2 Total page 1 of 2	s filed:			OFFICI Date Received	E USE ONLY	E ONLY	
3	COMMITTEE NAME	Austin Board of REAL*	ORS Political Ac	tion Comm	ittee		10/31/2018	OCC RECEIVED AT		
4	CAMPAIGN	MS/MRS/MR FI	₹\$T			MI		OCT 31'18 PH4	53	
	TREASURER NAME	Ms. E	nily				Date Hand-delivered	or Date Postmarked		
		NICKNAME LA	ST		****************	SUFFIX				
		С	nenevert				Receipt #	Amount		
5	CAMPAIGN	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE				
	TREASURER MAILING ADDRESS	4800 Spicewood Sprin	wood Springs Date Processed							
	NUUNESS	Austin, TX 78759					Date Imaged		;	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officebolder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Git/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wades/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Political Credit Card Payment		ns how to complete this form.	OTHER (enter a category not listed above)
Total pages Schedule F1: Sch: 1/1 Rpt: 2/2	2 FILER NAME Austin Board of REALTORS Political	I Action Committee	3 Filer ID (Ethics Commission Filers) 00035370
	5 Payee name		
10/30/2018	Kelly Graphics		
		ate; Zip Code	
Amount (\$) \$9,528.66	7 Payee address; City; Sta 1409 Quaker Ridge	ile; zip code	
Expenditure from corporate funds	Austin, TX 78746		
OF	(a) Category (See Categories listed at the top of this : Printing Expense	schedule) (b) Description Check if travel	outside of Texas. Complete Schedule T
EXPENDITURE	• '		n, TX, officeholder living expense postage for candidate mailers
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OF	Skidmore, Danielle (Ms.)	Austin City Council - Distri	ict 9 None