Report Of Direct Campaign Expenditures: Schedule ATX.1

(Previously Independent Expenditures not by a Candidate)

OCC RECEIVED AT
DEC 19 '18 PM 1:57

1 INDIVIDUAL OR ORGANIZATION NAME ☐ Filer is an individual	Committee or Organization Name* Home Builders Association of Greater Austin HomePAC Corporate

2 INDIVIDUAL OR ORGANIZATION ADDRESS

Address/ PO Box* 8140 Exchange Drive	Apartment or Suite Number

City* Austin	State* TX	Zip Code* 78754

3 COMMITTEE TREASURER NAME (if applicable)

Title	First Name Emily	Middle Initial K

Last Name Blair	Suffix

4 COMMITTEE TREASURER ADDRESS (if applicable)

Address/ PO Box 8140 Exchange Drive	Apartment or Suite Number

City Austin	State TX	Zip Code 78754

5 REPORT DATE

Date Filed (yyyymmdd)* 20181211

* Indicates a required field

Runoff

6 AFFIDAVIT

I swear or affirm upon 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 that this Report of Direct Campaign Expenditures 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 2-2-32.

DATE: _12/19/18_

_____
AFFIANT'S SIGNATURE

Emily Blair (Usser)

PRINT NAME

STATE OF TEXAS

COUNTY OF TRAVIS

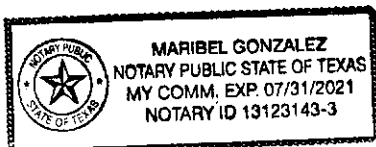This instrument was acknowledged, sworn to and subscribed before me by

Emily Kate Blair

On the _19th_ day of _December_ , _2018_ , to certify which witness my hand and official seal.

_____
Notary Public in and for the State of Texas

Maribel Gonzalez

Typed or Printed Name of Notary

MARIBEL GONZALEZ
NOTARY PUBLIC STATE OF TEXAS
MY COMM. EXP. 07/31/2021
NOTARY ID 13123143-3

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Expenditure

Itemize each direct campaign expenditure in Sections 1-4.
For additional expenditures, click "Add Another Expenditure Page" below.

1 PAYEE NAME

☐ Payee is an individual

Organization Name or Payee Last Name, as applicable*

Majority Strategies LLC

2 PAYEE ADDRESS

Payee Address/ PO Box*	Payee Apartment or Suite Number
12854 Kenan Drive	Suite 145

Payee City*	Payee State*	Payee Zip Code*
Jacksonville	FL	32258

3 EXPENDITURE DETAILS

Category*	($) Expenditure Amount*
Advertising Expense	$9,837.98

Description (If Category is "Other")	Expenditure Date*
Direct Mail, Digital Ads	20181204

4 Identify each candidate or ballot measure supported or opposed by the above expenditure, **as applicable**

Candidate Last Name or Ballot Measure Supported/Opposed*	Candidate First Name (if applicable)	Office Sought (if applicable)	Office Held (if applicable)
Supported	Pio Renteria	City Council	City Council

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Contribution

Effective September 1, 2016 information related to contributions must be reported if the individual or organization making a direct campaign expenditure has accepted a contribution.

For each contributor who made one or more contributions in an aggregate amount of $500 or more after August 31, 2016, that have not previously been reported, the following information must be provided for each accepted contribution.

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

1 CONTRIBUTOR NAME ☒ Contributor is an individual	Contributor Title ⬚ Contributor First Name* ⬚ Organization Name or Contributor Last Name, as applicable* ⬚ Contributor Suffix ⬚
2 CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* ⬚ Contributor Apartment or Suite Number ⬚ Contributor City* ⬚ Contributor State* ⬚ Contributor Zip Code* ⬚ Contributor Employer* ⬚ Contributor Occupation* ⬚
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* ⬚ ($) Contribution Amount* ⬚

Add Another Contribution Page