



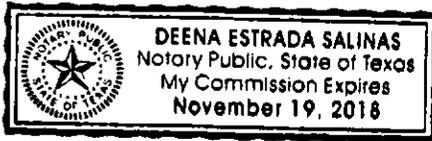
# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

**FORM MPAC  
COVER SHEET PG 2**

<b>12 COMMITTEE NAME</b> Austin Police Association PAC		<b>ACCOUNT #</b> 00015883
<b>13 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (identify by name or, if applicable, classify by party)	A. Supported Ora Houston for Austin City Council District 1  B. Opposed
	<b>2. Measures</b> (describe by date and location of election and nature of issue)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (identify by name or, if applicable, classify by party)	
<b>14 CONTRIBUTION TOTALS</b>	<b>1. TOTAL POLITICAL CONTRIBUTIONS OF \$10 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED (OR \$20 OR LESS IF QUALIFIED FOR HIGHER THRESHOLD)</b> <input type="checkbox"/> Check here if this report qualifies for the higher itemization threshold.	\$ 2,862.80
	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ 3,010.80
<b>EXPENDITURE TOTALS</b>	<b>3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 23,084.67
<b>CONTRIBUTION BALANCE</b>	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 66,887.99
<b>OUTSTANDING LOAN TOTALS</b>	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

**15 AFFIDAVIT**

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.



*Jimmie K. Williams*  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jimmie Williams, this the 29th day of September, 2014, to certify which, witness my hand and seal of office.

*Deena Estrada Salinas*  
Signature of officer administering oath

Deena Estrada Salinas  
Printed name of officer administering oath

Notary Public  
Title of officer administering oath

# MONTHLY FILING GPAC REPORT: PURPOSE

## FORM MPAC ADDENDUM

Page 3 of 11

COMMITTEE NAME Austin Police Association PAC		ACCOUNT # 00015883
<b>13</b> 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 Delia Garza for Austin City Council District 2  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)	
	1. Candidates  (identify by name or, if applicable, classify by party)	A. Supported Katrina Daniel for Austin City Council District 4  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)	
	1. Candidates  (identify by name or, if applicable, classify by party)	A. Supported Robert Thomas for Austin City Council Dist. 10  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)	

**MONTHLY FILING GPAC REPORT:  
PURPOSE****FORM MPAC  
ADDENDUM**

Page 4 of 11

COMMITTEE NAME Austin Police Association PAC		ACCOUNT # 00015883
13 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
		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)	Kirk Watson, Texas Senator
	COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)	1. Candidates  (identify by name or, if applicable, classify by party)
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)		
COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)		1. Candidates  (identify by name or, if applicable, classify by party)
	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)	Kirk Watson, Texas Senator

**MONTHLY FILING GPAC REPORT:  
PURPOSE****FORM MPAC  
ADDENDUM**

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COMMITTEE NAME		Austin Police Association PAC	ACCOUNT #
			00015883
13 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	
		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)	Dawanna Dukes, TX State Representative	

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 1/2 Report: 6/11	
<b>2</b> FILER NAME Austin Police Association PAC		<b>3</b> ACCOUNT # (Ethics Commission filers) 00015883	
<b>4</b> Date  09/06/2014	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bigongiari, Anthony (Mr.)  ..... <b>6</b> Contributor address; City; State; Zip Code 715 E. 8th Street Austin, TX 78701	<b>7</b> Amount of contribution (\$)  \$18.00	<b>8</b> In-kind contribution description (if applicable)
<b>9</b> Principal occupation / Job title (See Instructions) Austin Police Officer		<b>10</b> Employer (See Instructions) Austin Police Department	
Date  09/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Michael (Mr.)  ..... Contributor address; City; State; Zip Code 715 E. 8th Street Austin, TX 78701	Amount of contribution (\$)  \$15.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Austin Police Officer		Employer (See Instructions) Austin Police Department	
Date  09/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Casaday, Kenneth (Mr.)  ..... Contributor address; City; State; Zip Code 715 E. 8th Street Austin, TX 78701	Amount of contribution (\$)  \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Austin Police Officer		Employer (See Instructions) Austin Police Department	
Date  09/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Crumrine, Michael (Mr.)  ..... Contributor address; City; State; Zip Code 715 E. 8th Street Austin, TX 78701	Amount of contribution (\$)  \$20.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Austin Police Officer		Employer (See Instructions) Austin Police Department	
Date  09/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dusterhoff, Jason (Mr.)  ..... Contributor address; City; State; Zip Code 715 E. 8th Street Austin, TX 78701	Amount of contribution (\$)  \$15.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Austin Police Officer		Employer (See Instructions) Austin Police Department	



# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/4 Report: 8/11	<b>2 FILER NAME</b> Austin Police Association PAC	<b>3 ACCOUNT # (TEC filers)</b> 00015883
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<b>4 Date</b> 09/23/2014	<b>5 Payee name</b> Austin Police Association	
<b>6 Amount (\$)</b> \$265.28 <input type="checkbox"/> Expenditure from corporate funds	<b>7 Payee address</b> City; State; Zip Code 5817 Wilcab Road Austin, TX 78721	
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Event Expense	<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Refund credit card use: food for meet and greet austin city council candidate reception <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought: Office held:

<b>Date</b> 09/22/2014	<b>Payee name</b> Chiappardi, Jason (Mr.)	
<b>Amount (\$)</b> \$47.35 <input type="checkbox"/> Expenditure from corporate funds	<b>Payee address</b> City; State; Zip Code 5817 Wilcab Road Austin, TX 78721	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Reimbursement: food expense for PAC Committee business meeting <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought: Office held:

<b>Date</b> 09/22/2014	<b>Payee name</b> Dawna Dukes Campaign	
<b>Amount (\$)</b> \$500.00 <input type="checkbox"/> Expenditure from corporate funds	<b>Payee address</b> City; State; Zip Code P.O. Box 14645 Austin, TX 78761	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contribution to fundraising efforts to reelect Dawna Dukes for TX Representative <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Dukes, Dawna (Ms.)	Office sought: Office held: State Representative District 46

<b>Date</b> 08/26/2014	<b>Payee name</b> Escobar, Valencia (Mrs.)	
<b>Amount (\$)</b> \$200.00 <input type="checkbox"/> Expenditure from corporate funds	<b>Payee address</b> City; State; Zip Code 5817 Wilcab Road Austin, TX 78721	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Accounting/Banking	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Monthly fee for bank reconciliatin & PAC reportings for the month of Sept. 2014 <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name	Office sought: Office held:

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/4 Report: 9/11	2 FILER NAME Austin Police Association PAC	3 ACCOUNT # (TEC filers) 00015883
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4 Date 09/17/2014	5 Payee name Harkrider Group, LLC	
6 Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address City; State; Zip Code P.O. Box 11550 Austin, TX 78711	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Services for 2014 Austin City Council Election <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: Daniel, Katrina (Mrs.) Office sought: Austin City Council District 4 Office held:	

Date	Payee name (see previous)	
Amount (\$) <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: Garza, Delia (Mrs.) Office sought: Austin City Council District 2 Office held:	

Date	Payee name (see previous)	
Amount (\$) <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: Houston, Ora (Mrs.) Office sought: Austin City Council District 1 Office held:	

Date	Payee name (see previous)	
Amount (\$) <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: Thomas, Robert (Mr.) Office sought: Austin City Council District 10 Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 3/4 Report: 10/11		<b>2 FILER NAME</b> Austin Police Association PAC		<b>3 ACCOUNT # (TEC filers)</b> 00015883	
<b>4 Date</b> 09/10/2014		<b>5 Payee name</b> Kelly Graphics			
<b>6 Amount (\$)</b> \$9,222.04 <input type="checkbox"/> Expenditure from corporate funds		<b>7 Payee address</b> City: State: Zip Code 1409 Quaker Ridge Austin, TX 78746			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Political Mailer supporting Austin City Council Candidates Districts 1,2,4 & 10 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name Daniel, Katrina (Mrs.)		Office sought: Austin City Council District 4 Office held:	
<b>Date</b>		Payee name (see previous)			
<b>Amount (\$)</b> <input type="checkbox"/> Expenditure from corporate funds		Payee address City: State: Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name Garza, Delia (Mrs.)		Office sought: Austin City Council District 2 Office held:	
<b>Date</b>		Payee name (see previous)			
<b>Amount (\$)</b> <input type="checkbox"/> Expenditure from corporate funds		Payee address City: State: Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name Houston, Ora (Mrs.)		Office sought: Austin City Council District 1 Office held:	
<b>Date</b>		Payee name (see previous)			
<b>Amount (\$)</b> <input type="checkbox"/> Expenditure from corporate funds		Payee address City: State: Zip Code			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name Thomas, Robert (Mr.)		Office sought: Austin City Council District 10 Office held:	

**POLITICAL EXPENDITURES**

**SCHEDULE F**

**EXPENDITURE CATEGORIES**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gifts/Awards/Memorial Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 4/4 Report: 11/11	<b>2</b> FILER NAME Austin Police Association PAC	<b>3</b> ACCOUNT # (TEC filers) 00015883
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<b>4</b> Date 09/22/2014	<b>5</b> Payee name Kirk Watson Campaign, Kirk (Mr.)
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<b>6</b> Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address City; State; Zip Code P.O. Box 2004 Austin, TX 78768
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contribution to fundraiser to benefit the reelection of Senator Kirk Watson <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Watson, Kirk (Mr.)	Office sought: State Senator District 14	Office held: State Senator District 14
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Date 09/22/2014	Payee name Kirk Watson Campaign, Kirk (Mr.)
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Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code P.O. Box 2004 Austin, TX 78768
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<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> contribution for fundraising event to benefit the Kirk Watson campaign <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Watson, Krik (Mr.)	Office sought: State Senator District 14	Office held: State Senator District 14
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Date 09/22/2014	Payee name Melissa Zone Campaign
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Amount (\$) \$350.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address City; State; Zip Code P.O. Box 10773 Austin, TX 78766
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<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contribution to elect Melissa Zone to Austin City Council District 7 <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Zone, Melissa (Mrs.)	Office sought: Austin City Council District 7	Office held:
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