

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

The MPAC INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00027574

2 PAGE #
1 of 3

3 COMMITTEE NAME

RECA Good Government PAC

OFFICE USE ONLY

Date Received

4 COMMITTEE ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT/SUITE #; CITY; STATE ZIP CODE

98 San Jacinto Blvd
Suite 510
Austin, TX 78701

Date Hand-delivered or Date Postmarked

5 CAMPAIGN TREASURER NAME

MS / MRS / MR

FIRST

MI

Nancy McDonald

NICKNAME

LAST

SUFFIX

Siefken

Receipt #

Date Processed

Date Imaged

6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

98 San Jacinto
Ste 510
Austin, TX 78701

7 CAMPAIGN TREASURER'S MAILING ADDRESS

☐ Change of Address

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

98 San Jacinto
Ste 510
Austin, TX 78701

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 320-4151

9 REPORT TYPE

☒ Monthly
(Enter date below)

☐ 10th day after campaign
treasurer termination

☐ Dissolution
(attach PAC-DR)

10 MONTHLY REPORT FILING DEADLINE

☐ January 5

☐ April 5

☐ July 5

☒ October 5

☐ February 5

☐ May 5

☐ August 5

☐ November 5

☐ March 5

☐ June 5

☐ September 5

☐ December 5

11 PERIOD COVERED

Month Day Year

08/26/2014

THROUGH

Month Day Year

09/25/2014

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME RECA Good Government PAC

ACCOUNT #
00027574

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)

14 CONTRIBUTION TOTALS
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)
☐ Check here if this report qualifies for the higher itemization threshold.

\$ 0.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 0.00

EXPENDITURE TOTALS
3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

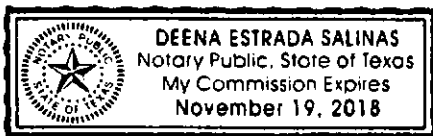
\$ 6,000.00

CONTRIBUTION BALANCE
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 77,533.64

OUTSTANDING LOAN TOTALS
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0.00

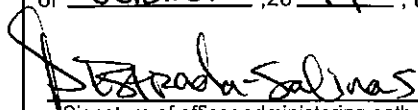
15 AFFIDAVIT


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.


 Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

 Sworn to and subscribed before me, by the said Nancy Siegen, this the 2nd day of October, 2014, to certify which, witness my hand and seal of office.


 Signature of officer administering oath

Deena Estrada Salinas
 Printed name of officer administering oath

Notary Public
 Title of officer administering oath

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
FeesGifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing ExpenseSalaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental ExpenseLoan 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: 1/1 Report: 3/3		2 FILER NAME RECA Good Government PAC		3 ACCOUNT # (TEC filers) 00027574	
4 Date 09/24/2014	5 Payee name Monument Group LLC				
6 Amount (\$) \$6,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address City: State: Zip Code 1510 San Antonio Street Austin, TX 78701				
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"/> Strategic plan for member political engagement		
			<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held: