

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)
00016265

2 PAGE #
1 of 8

3 COMMITTEE NAME

Austin Apartment Association PAC

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt #

Amount

Date Processed

Date Imaged

4 COMMITTEE ADDRESS

☐ Change of Address

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

4107 Medical Parkway
Suite 100
Austin, TX 78756

5 CAMPAIGN TREASURER NAME

MS / MRS / MR
Ms.

FIRST
Kristan

MI

NICKNAME

LAST
Arrona

SUFFIX

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

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

8620 Burnet Road
Suite 475
Austin, TX 78757

7 CAMPAIGN TREASURER'S MAILING ADDRESS

☐ Change of Address

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

8620 Burnet Road
Suite 475
Austin, TX 78757

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(512) 323-0990

9 REPORT TYPE

☒ Monthly
(Enter date below)

☐ 10th day after campaign
treasurer termination

☐ Dissolution
(attach PAC-DR)

10 MONTHLY REPORT FILING DEADLINE

☐ January 5
☐ February 5
☐ March 5

☐ April 5
☐ May 5
☐ June 5

☐ July 5
☐ August 5
☐ September 5

☐ October 5
☐ November 5
☒ December 5

11 PERIOD COVERED

Month Day Year

10/26/2014

THROUGH

Month Day Year

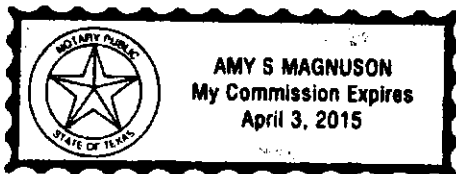
11/25/2014

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME Austin Apartment Association PAC		ACCOUNT # 00016265	
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) <input type="checkbox"/> Check here if this report qualifies for the higher itemization threshold.
		2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 99.00
EXPENDITURE TOTALS		3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED	\$ 0.00
		4. TOTAL POLITICAL EXPENDITURES	\$ 24,767.93
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 108,529.17
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.

Kristan J Arona
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Kristan J Arona, this the 4th day of December, 2014, to certify which, witness my hand and seal of office.

Amy S Magnuson
Signature of officer administering oath

Amy S Magnuson
Printed name of officer administering oath

Notary Public
Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 3/8	
2 FILER NAME Austin Apartment Association PAC		3 ACCOUNT # (Ethics Commission filers) 00016265	
4 Date 11/04/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reagan, Heather (Ms.) 6 Contributor address; City; State; Zip Code 7917 Castle Peak Trail Austin, TX 78726	7 Amount of contribution (\$) \$99.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Regional Supervisor		10 Employer (See Instructions) Lincoln Property Company	

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: 1/4 Report: 4/8		2 FILER NAME Austin Apartment Association PAC		3 ACCOUNT # (TEC filers) 00016265	
4 Date 10/30/2014		5 Payee name American Express			
6 Amount (\$) \$22.93 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address City; State; Zip Code PO Box 53852 Phoenix, AR 85072-3852			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Bank Fees <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:			
Date 11/11/2014		Payee name District 3 for Pio Campaign			
Amount (\$) \$350.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address City; State; Zip Code 1511 Haskell Street Austin, TX 78702-5311			
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"/> Contributions <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 11/11/2014		Payee name Ellen Troxclair for City Council			
Amount (\$) \$350.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address City; State; Zip Code PO Box 91812 Austin, TX 78709			
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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 11/11/2014		Payee name Jeb Boyt Campaign			
Amount (\$) \$350.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address City; State; Zip Code PO Box 66241 Austin, TX 78766			
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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		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: 5/8		2 FILER NAME Austin Apartment Association PAC		3 ACCOUNT # (TEC filers) 00016265	
4 Date 11/11/2014		5 Payee name Jimmy Flannigan for ACC Dist 6			
6 Amount (\$) \$350.00 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address City: State: Zip Code 8601 Anderson Mill Road Austin, TX 78729			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contribution <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:	
Date 11/11/2014		Payee name Ora Houston for Austin City Council			
Amount (\$) \$350.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address City: State: Zip Code 7333 E US Hwy 290 Austin, TX 78723			
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"/> Contributions <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/11/2014		Payee name Sheri Gallo Campaign			
Amount (\$) \$350.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address City: State: Zip Code PO Box 28521 Austin, TX 78755			
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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 11/11/2014		Payee name Steve Adler Campaign			
Amount (\$) \$350.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address City: State: Zip Code PO Box 302854 Austin, TX 78703			
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 <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		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: 3/4 Report: 6/8		2 FILER NAME Austin Apartment Association PAC		3 ACCOUNT # (TEC filers) 00016265	
4 Date 10/27/2014		5 Payee name Y Strategy			
6 Amount (\$) \$10,545.00 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address City: State: Zip Code 3110 Manor Road Austin, TX 78723			
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 Fee <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:	
Date 10/30/2014		Payee name Y Strategy			
Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address City: State: Zip Code 3110 Manor Road Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Fee <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/30/2014		Payee name Y Strategy			
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address City: State: Zip Code 3110 Manor Road Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Fee <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 10/30/2014		Payee name Y Strategy			
Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address City: State: Zip Code 3110 Manor Road Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting Fee <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		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: 4/4 Report: 7/8		2 FILER NAME Austin Apartment Association PAC		3 ACCOUNT # (TEC filers) 00016265
4 Date 11/11/2014	5 Payee name Y Strategy			
6 Amount (\$) \$3,250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address City; State; Zip Code 3110 Manor Road Austin, TX 78723			
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 Fee	
	<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:			

**POLITICAL CONTRIBUTIONS RETURNED
TO COMMITTEE****SCHEDULE J**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 8/8
2 FILER NAME Austin Apartment Association PAC		3 ACCOUNT # (Ethics Commission filers) 00016265
4 Date Returned 11/17/2014	5 Original payee name Jade Sheppard Campaign 6 Original payee address; City; State; Zip Code 6001 West Parmer Lane Suite 370 #114 Austin, TX 78727	7 Amount Returned (\$) \$500.00