

FORM COR-PAC

# CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

1 ACCOUNT # 00015509	2 PAGE # 1 of 6
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3 COMMITTEE NAME	Home Builders Association of Greater Austin Home PAC Corporate	<b>OFFICE USE ONLY</b> Date Received Date Hand-delivered or Date Postmarked Receipt # Legal Date Processed Date Imaged
4 TREASURER NAME	FIRST MI LAST Savio, Harry (Mr.)	City of Austin Office of the City Clerk P.O. Box 1088 Austin, Texas 78767 AT 4:36 PM 12/14/2014
5 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> July 15 <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution Report <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Other (specify) _____	
6 ORIGINAL PERIOD COVERED	Month Day Year      Month Day Year 10/26/2014      THROUGH      12/08/2014	

7 EXPLANATION OF CORRECTION

I erroneously entered an incorrect date. The proper date should have been December 16, but this amendment remains a timely filing.

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

☐ **Semiannual reports:** This report is an amendment/correction to a semi-annual report due on or after September 1, 2011. If amendment/correction is filed on or after the eighth day after the original report was filed, I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ **Other reports (excluding semiannual reports):** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Harry Savio

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM GPAC COVER SHEET PG 1

The GPAC INSTRUCTION GUIDE explains how to complete this form.

**1 ACCOUNT #**  
(Ethics Commission filers)  
00015509

**2 PAGE #**  
2 of 6
**3 COMMITTEE NAME**

Home Builders Association of Greater Austin Home PAC Corporate

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

**4 COMMITTEE ADDRESS**

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

8140 Exchange Drive  
Austin, TX 78754☐ Change of Address**5 CAMPAIGN TREASURER NAME**

MS / MRS / MR

FIRST

MI

Mr.

Harry

NICKNAME

LAST

SUFFIX

Savio

Receipt #

Amount

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

8140 Exchange Drive  
Austin, TX 78754**7 CAMPAIGN TREASURER'S MAILING ADDRESS**

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

8140 Exchange Drive  
Austin, TX 78754☐ Change of Address**8 CAMPAIGN TREASURER PHONE**

AREA CODE PHONE NUMBER EXTENSION

(512) 454-5588

111

**9 REPORT TYPE**☐

January 15

☐

30th day before election

☐

Dissolution (attach PAC-DR)

☐

July 15

☒

8th day before election

☐

10th day after campaign treasurer termination

☐

Runoff

**10 PERIOD COVERED**

Month Day Year

THROUGH

Month Day Year

10/26/2014

12/08/2014

**11 ELECTION**

Month Day Year

12/16/2014

ELECTION TYPE

☐

Primary

☒

Runoff

☐

General

☐

Special

GO TO PAGE 2

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

## FORM GPAC COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Home Builders Association of Greater Austin Home PAC Corporate		<b>ACCOUNT #</b> 00015509
<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
		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 \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED (OR \$100 OR LESS IF QUALIFIED FOR HIGHER THRESHOLD)</b> <input type="checkbox"/> Check here if this report qualifies for the higher itemization threshold.
<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>		\$ 15,785.00
<b>EXPENDITURE TOTALS</b>	<b>3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 19,434.91
<b>CONTRIBUTION BALANCE</b>	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 73,281.64
<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.

Harry Savio

\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath

\_\_\_\_\_  
Printed name of officer administering oath

\_\_\_\_\_  
Title of officer administering oath

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

<b>The INSTRUCTION GUIDE explains how to complete this form.</b>		<b>1 PAGE #</b> Schedule: 1/1 Report: 4/6	
<b>2 FILER NAME</b> Home Builders Association of Greater Austin Home PAC Corporate		<b>3 ACCOUNT #</b> (Ethics Commission filers) 00015509	
<b>4 Date</b>  12/02/2014	<b>5 Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID# _____) Austin Fire Fighters Association  <b>6 Contributor address; City; State; Zip Code</b> 7537 Cameron Road Austin, TX 78752-2013	<b>7 Amount of contribution (\$)</b>  \$15,000.00  (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<b>8 In-kind contribution description (if applicable)</b>
<b>9 Principal occupation / Job title (See Instructions)</b> Political Action Committee		<b>10 Employer (See Instructions)</b> Austin Firefighters Association	

**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: 1/2 Report: 5/6		<b>2 FILER NAME</b> Home Builders Association of Greater Austin Home PAC Corporate		<b>3 ACCOUNT # (TEC filers)</b> 00015509	
<b>4 Date</b> 12/08/2014		<b>5 Payee name</b> Bludworth, Naomi			
<b>6 Amount (\$)</b> \$630.00 <input type="checkbox"/> Expenditure from corporate funds		<b>7 Payee address</b> City; State; Zip Code 1309 W. Lakeland Drive Austin, TX 78765			
<b>8 PURPOSE OF EXPENDITURE</b>		<b>(a) Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Print Design  <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> 11/20/2014		<b>Payee name</b> Mike Levigne Public Relations			
<b>Amount (\$)</b> \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds		<b>Payee address</b> City; State; Zip Code 1514 Rich Creek Rd Austin, TX 78757			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> PAC Board Consulting Services  <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> 12/01/2014		<b>Payee name</b> Mike Levigne Public Relations			
<b>Amount (\$)</b> \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds		<b>Payee address</b> City; State; Zip Code 1514 Rich Creek Rd Austin, TX 78757			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> PAC Board Consulting Services  <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> 12/01/2014		<b>Payee name</b> United States Postal Service			
<b>Amount (\$)</b> \$2,665.70 <input type="checkbox"/> Expenditure from corporate funds		<b>Payee address</b> City; State; Zip Code 7700 Northcross Drive Austin, TX 78757			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> District 10 Direct Mail  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		Candidate / Officeholder name Sheri, Gallo		Office sought: Office held: City Council District 10	

**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: 2/2 Report: 6/6		<b>2 FILER NAME</b> Home Builders Association of Greater Austin Home PAC Corporate		<b>3 ACCOUNT # (TEC filers)</b> 00015509
<b>4 Date</b> 12/02/2014	<b>5 Payee name</b> United States Postal Service			
<b>6 Amount (\$)</b> \$6,506.47 <input type="checkbox"/> Expenditure from corporate funds	<b>7 Payee address</b> City: State: Zip Code 7700 Northcross Drive Austin, TX 78757			
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> City-wide Issues Expense	
	<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> 12/03/2014	<b>Payee name</b> United States Postal Service			
<b>Amount (\$)</b> \$1,887.57 <input type="checkbox"/> Expenditure from corporate funds	<b>Payee address</b> City: State: Zip Code 7700 Northcross Drive Austin, TX 78757			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Troclair General	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Troclair, Ellen		Office sought: City Council District 8	Office held:
<b>Date</b> 12/08/2014	<b>Payee name</b> United States Postal Service			
<b>Amount (\$)</b> \$745.17 <input type="checkbox"/> Expenditure from corporate funds	<b>Payee address</b> City: State: Zip Code 7700 Northcross Drive Austin, TX 78757			
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Printing Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Troclair Position Comparison Piece	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name Troclair, Ellen		Office sought: City Council District 8	Office held: