MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

COVER SHEET PG 1

The MPAC Instruction	2 PAGE # 1 of 3						
3 COMMITTEE NAME	· · · · · ·						
RECA Good Governm		OFFICE USE ONLY					
1			Date Received				
4 COMMITTEE ADDRESS Change of Address	ADDRESS / PO BOX; APT/SUITE #; CITY; 98 San Jacinto Blvd Suite 510 Austin, TX 78701	STATE ZIP CODE	Date Hand-delivered or Date Postrial Color				
5 CAMPAIGN TREASURER	ms/mrs/mr First Heidi	MI	Receipt # Amount Y C				
NAME	NICKNAME LAST Gerbracht	Date Processed 2 ER					
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: 98 San Jacinto Ste 510 Austin, TX 78701	CITY: STATE;	ZIP CODE				
7 CAMPAIGN TREASURER'S MAILING ADDRESS Change of Address	STREET OR PO BOX: APT / SUITE #: 98 San Jacinto Ste 510 Austin, TX 78701	CITY; STATE;	ZIP CODE				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 320-4151	EXTENSION					
9 REPORT TYPE	Monthly 10th do treasur	ay after campaign rer ternination	Dissolution (attach PAC-DR)				
10 MONTHLY REPORT FILING DEADLINE	☐ January 5 ☐ April 5 ☐ May 5 ☐ March 5 ☐ June 5	July 5 August 5 September 5	October 5 November 5 December 5				
11 PERIOD COVERED	Month Day Year 12/26/2014	THROUGH	Month Day Year 01/25/2015				
GO TO PAGE 2							

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

<u> </u>								
12 COMMITTEE RECA Good Government PAC NAME			ACCOUNT #					
	NAME			00027574	1			
13	COMMITTEE ACTIVITY	1. Candidates	A. Supported					
(Attach lists on plain paper to complete this	(identify by name or, if applicable, classify by party)	B. Opposed						
	2. Measures	A. Supported						
	report if necessary.)	(describe by date and location of election and	B. Opposed					
		nature of issue) 3. Officeholders Assisted						
		(identify by name or, if applicable, classify by party)						
14 CONTRIBUTION TOTALS		PLEDGES, LOA	LICAL CONTRIBUTIONS OF \$10 OR LESS (OTHER THAN DANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED ESS IF QUALIFIED FOR HIGHER THRESHOLD)	\$	0.00			
l		☐ Check h	nere if this report qualifies for the higher itemization threshold.	1				
		2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	10,000.00			
EXPENDITURE TOTALS		3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED		\$	0.00			
		4. TOTAL POLI	ITICAL EXPENDITURES	\$	0.00			
	CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$	66,131.49			
	OUTSTANDING LOAN TOTALS		CIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE THE REPORTING PERIOD	\$	0.00			
t 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.								
	Heidi L Gerbracht							
			Signature of Campaigr	n Treasurer				
AF	FIX NOTARY STAMP / SEA	AL ABOVE						
Sv	vorn to and subscribed	_ , 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

The Instruction Guide explains how to complete this form.			1 PAGE # Schedule: 1/1	1 Report: 3/3	
2 FILER NAME RECA Good Government PAC			3 ACCOUNT# 00027574	(Ethics Commission filers)	
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#) Berger, Ryan (Mr.)		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
01/22/2015	6 Contributor address; City; State; Zip Code 1613 West 12th Street #440 Austin, TX 78703		\$2,000.00	 -	
			`	Texas, complete Schedule T)	
9 Principal occurreal estate d	pation / Job title (See Instructions) eveloper	10 Employer (See Instructions) The Berger Company			
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
01/22/2015	Contributor address; City; State; Zip Code 4813 Prairie Dunes Dr. Austin, TX 78747		\$2,000.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) contractor		Employer (See In White Construc			
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
01/22/2015	Contributor address; City; State; Zip Code 1515 Mohle Dr. Austin, TX 78703		\$2,000.00	 	
			'	Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Title Agent		Employer (See In Prominent Title	structions)		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
01/22/2015	Contributor address; City; State; Zip Code 600 Congress Ave Ste 2200 Austin, TX 78701		\$2,000.00	 - -	
			(If travel outside of	Texas, complete Schedule T) 🔲	
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)		
Date	Full name of contributor	<u>‡)</u>	Amount of contribution (\$)	Iп-kind contribution description (if applicable)	
01/22/2015	Contributor address; City; State; Zip Code 401 Congress Ave Ste 2100		\$2,000.00	 	
	Austin, TX 78701			ı	
1			(If travel outside of	Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions)	Employer (See In	_:		