



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Office Use Only ☐

Section 1: Cover Sheet

Use this form to:

- 1) Register as a lobbyist in accordance with City Code Section 4-8-5;
- 2) Amend or update registration information previously provided in accordance with City Code Section 4-8-5;
- 3) Terminate registration as a lobbyist per City Code Section 4-8-5;
- 4) Report lobbying activities engaged in during the preceding calendar quarter in accordance with Section 4-8-6 of the City Code; or
- 5) For entities electing to register and report as a business entity per City Code Section 4-8-4, this form must be filled out for each individual lobbyist employed by the entity.

For detailed instructions on how to complete this form, see the Lobbyist Reporting Form: Reporting Guide

This form must be submitted in its original digital format. Please do not print or scan this form.

FOR BEST RESULTS, PLEASE USE ADOBE READER OR ADOBE ACROBAT WHEN FILLING OUT THE FORM.

LOBBYIST NAME	<table><tr><td>Title</td><td>First Name*</td><td>Middle</td></tr><tr><td>MR.</td><td>G. FERRIS</td><td></td></tr><tr><td>Last Name*</td><td>Suffix</td><td></td></tr><tr><td>CLEMENTS</td><td></td><td></td></tr><tr><td colspan="3">☐ My employer is a 501c(3) non-profit organization</td></tr></table>	Title	First Name*	Middle	MR.	G. FERRIS		Last Name*	Suffix		CLEMENTS			☐ My employer is a 501c(3) non-profit organization		
Title	First Name*	Middle														
MR.	G. FERRIS															
Last Name*	Suffix															
CLEMENTS																
☐ My employer is a 501c(3) non-profit organization																
EMPLOYING ENTITY	<table><tr><td>☐ My employer is registered as a business entity, pays an entity registration fee, and is reporting on my behalf</td></tr><tr><td>Entity/Organization Name*</td></tr><tr><td></td></tr></table>	☐ My employer is registered as a business entity, pays an entity registration fee, and is reporting on my behalf	Entity/Organization Name*													
☐ My employer is registered as a business entity, pays an entity registration fee, and is reporting on my behalf																
Entity/Organization Name*																
LOBBYIST PERMANENT BUSINESS STREET ADDRESS	<table><tr><td>Permanent Business Street Address*</td><td>Apartment or Suite Number</td></tr><tr><td>100 CONGRESS AVE</td><td>STE 1300</td></tr><tr><td>City*</td><td>State* Zip Code*</td></tr><tr><td>AUSTIN</td><td>TX 78701</td></tr></table>	Permanent Business Street Address*	Apartment or Suite Number	100 CONGRESS AVE	STE 1300	City*	State* Zip Code*	AUSTIN	TX 78701							
Permanent Business Street Address*	Apartment or Suite Number															
100 CONGRESS AVE	STE 1300															
City*	State* Zip Code*															
AUSTIN	TX 78701															
LOBBYIST BUSINESS MAILING ADDRESS	<table><tr><td>Business Mailing Address*</td><td>Apartment or Suite Number</td></tr><tr><td>100 CONGRESS AVE</td><td>STE 1300</td></tr><tr><td>City*</td><td>State* Zip Code*</td></tr><tr><td>AUSTIN</td><td>TX 78701</td></tr></table>	Business Mailing Address*	Apartment or Suite Number	100 CONGRESS AVE	STE 1300	City*	State* Zip Code*	AUSTIN	TX 78701							
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100 CONGRESS AVE	STE 1300															
City*	State* Zip Code*															
AUSTIN	TX 78701															

* Indicates a required field



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*Required for Lobbyist Registration, Termination,
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REPORT TYPE *

Check all that apply

- ☐ I am registering as a new lobbyist
- ☐ I am renewing my annual lobbyist registration
- ☐ I am updating my current registration information of my most recent Quarterly Activity Report
- ☒ I am submitting my Quarterly Activity Report, including client compensation and expenditures, for the following activity reporting deadline:
- ☐ January ☒ April ☐ July ☐ October
- ☐ I am correcting the information provided on a previously filed report
- Previous Report Type: Previous Report Date:
- ☐ I am terminating my Lobbyist Registration with the City of Austin and this report is my final activity report.



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Section 2: Municipal Question

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- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text" value="70 PASCAL LANE"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78746"/>
	Property Legal Description		
	<input type="text"/>		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

Add Additional Municipal Question

Delete this page

Page 3 of 217 Revised: 3/16/2018



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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 8509 FM 969		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78724
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
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Page 4 of 217 Revised: 3/16/2018



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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 4300 STAGGERBRUSH ROAD		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78749
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
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Page 5 of 217 Revised: 3/16/2018



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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text" value="710 WEST AVE"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78701"/>
Property Legal Description			
<input type="text"/>			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
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Page 6 of 217 Revised: 3/16/2018



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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	COLTON BLUFF SPRINGS RD		
	City	State	Zip Code
	AUSTIN	TX	78744
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
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Delete this page

Page 7 of 217 Revised: 3/16/2018



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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text" value="6500 RR 2222"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78730"/>
Property Legal Description			
<input type="text"/>			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
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Page 8 of 217 Revised: 3/16/2018



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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text" value="2300 CLOUD WAY"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78759"/>
	Property Legal Description		
	<input type="text"/>		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
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Page 9 of 217 Revised: 3/16/2018



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	Address		Suite or Apartment Number
	PEARCE & WOLF LANE		
	City	State	Zip Code
	CEDAR CREEK	TX	78612
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text" value="220 S. CONGRESS AVE"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78701"/>
Property Legal Description			
<input type="text"/>			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
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	Address		Suite or Apartment Number
	<input type="text" value="308 GUADALUPE STREET"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78701"/>
Property Legal Description			
<input type="text"/>			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

Add Additional Municipal Question

Delete this page



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text" value="6001 AIRPORT ROAD"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78752"/>
	Property Legal Description		
	<input type="text"/>		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	304 E. CESAR CHAVEZ		
	City	State	Zip Code
	AUSTIN	TX	78701
Property Legal Description			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 1901 SAN ANTONIO STREET		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78705
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	S. CONGRESS AND RALPH ABLENADO		
	City	State	Zip Code
	AUSTIN	TX	78748
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text" value="5210 N LAMAR BLVD"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78751"/>
Property Legal Description			
<input type="text"/>			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address E. STATE HWY 71		Suite or Apartment Number
	City DEL VALLE	State TX	Zip Code 78617
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	DEVELOPMENT OF MAJOR LEAGUE SOCCER STADIUM AND RELATED PRACTICE FACILITIES		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Property Legal Description		
	<input type="text"/>		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☐ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☐ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO REZONING AND ANY RELATED SITE PERMITS		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 1109 S. PLEASANT VALLEY ROAD		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78741
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO REZONING AND ANY RELATED SITE PERMITS		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 1600 WICKERSHAM LANE		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78741
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
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| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO REZONING AND ANY RELATED SITE PERMITS		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	4700 E. RIVERSIDE DRIVE		
	City	State	Zip Code
	AUSTIN	TX	78741
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 1515 WICKERSHAM LANE		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78741
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	2033 E 5TH STREET		
	City	State	Zip Code
	AUSTIN	TX	78702
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	501 NAVASOTA STREET		
	City	State	Zip Code
	AUSTIN	TX	78702
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	502 ONION STREET		
	City	State	Zip Code
	AUSTIN	TX	78702
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
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| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	1402, 1406, AND 1410 E. 5TH STREET		
	City	State	Zip Code
	AUSTIN	TX	78702
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
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| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	4400 MESA WOODS DRIVE		
	City	State	Zip Code
	AUSTIN	TX	78759
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Property Legal Description		
	<input type="text" value="LOT 1 VELOCITY TECHNOLOGY CENTER"/>		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	1438 YAGER LANE		
	City	State	Zip Code
	AUSTIN	TX	78753
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	3702 BLUESTEIN DRIVE		
	City	State	Zip Code
	AUSTIN	TX	78721
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
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| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	2552 GUADALUPE STREET		
	City	State	Zip Code
	AUSTIN	TX	78705
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 109 E. 7TH STREET		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78701
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
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| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	7016 RIBELEN RANCH DRIVE		
	City	State	Zip Code
	AUSTIN	TX	78750
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
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| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	15218 AND 15230 N. FM 620		
	City	State	Zip Code
	AUSTIN	TX	78717
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

Add Additional Municipal Question

Delete this page



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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	3803 AVENUE B		
	City	State	Zip Code
	AUSTIN	TX	78751
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	501 BRAZOS STREET		
	City	State	Zip Code
	AUSTIN	TX	78701
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	4701 RED BLUFF ROAD		
	City	State	Zip Code
	AUSTIN	TX	78702
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	COMPLIANCE WITH VARIOUS CODE REQUIREMENTS
PROPERTY ADDRESS OR LEGAL DESCRIPTION	<div>☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.</div> <div><div>Address</div><div>2400 S. CONGRESS AVENUE</div></div> <div><div>Suite or Apartment Number</div><div></div></div> <div><div>City</div><div>AUSTIN</div></div> <div><div>State</div><div>TX</div></div> <div><div>Zip Code</div><div>78704</div></div> <div><div>Property Legal Description</div><div></div></div>

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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Delete this page



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	5101 E. OLTORF STREET		
	City	State	Zip Code
	AUSTIN	TX	78741
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	5010 E. OLTORF STREET		
	City	State	Zip Code
	AUSTIN	TX	78741
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	5208 E. OLTORF STREET		
	City	State	Zip Code
	AUSTIN	TX	78741
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
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| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 2424 RIVERSIDE FARMS ROAD		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78741
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	12515 RESEARCH BLVD		
	City	State	Zip Code
	AUSTIN	TX	78759
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
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| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
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| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 6310 WILHELMINA DELCO DR.		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78752
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	6505 AIRPORT BLVD		
	City	State	Zip Code
	AUSTIN	TX	78752
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

Add Additional Municipal Question

Delete this page



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	12600 MCCALLEN PASS		
	City	State	Zip Code
	AUSTIN	TX	78753
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	70 RAINEY STREET		
	City	State	Zip Code
	AUSTIN	TX	78701
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	305 S. CONGRESS AVE		
	City	State	Zip Code
	AUSTIN	TX	78704
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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	Address		Suite or Apartment Number
	City	State	Zip Code
Property Legal Description			
ABS 160 SUR 50 CASTRO M ACR 130.4580 (1-D-1)			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
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| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
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| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	5505 PARADOX COVE		
	City	State	Zip Code
	AUSTIN	TX	78731
Property Legal Description			
PROPERTY OWNER			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	11902 BURNET ROAD		
	City	State	Zip Code
	AUSTIN	TX	78758
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	11921 MOPAC EXPRESSWAY		
	City	State	Zip Code
	AUSTIN	TX	78759
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
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| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 1122 E. 51st Street		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78723
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
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| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	4824 E. CESAR CHAVEZ		
	City	State	Zip Code
	AUSTIN	TX	78702
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	200 E. RIVERSIDE DRIVE		
	City	State	Zip Code
	AUSTIN	TX	78704
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
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| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	411, 413 E. 30TH STREET AND 2906 DUVAL		
	City	State	Zip Code
	AUSTIN	TX	78705
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
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| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
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- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	9101 RESEARCH BLVD.		
	City	State	Zip Code
	AUSTIN	TX	78758
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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Delete this page



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	425 W. RIVERSIDE DRIVE		
	City	State	Zip Code
	AUSTIN	TX	78704
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	7731 MANCHACA ROAD		
	City	State	Zip Code
	AUSTIN	TX	78745
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	1100 EAST 5TH STREET		
	City	State	Zip Code
	AUSTIN	TX	78702
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	200 TRINITY STREET		
	City	State	Zip Code
	AUSTIN	TX	78701
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	705 E. 11TH STREET		
	City	State	Zip Code
	AUSTIN	TX	78701
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	2415 E. 5TH STREET		
	City	State	Zip Code
	AUSTIN	TX	78702
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	6310 N. LAMAR BLVD.		
	City	State	Zip Code
	AUSTIN	TX	78752
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	10435 BURNET ROAD		
	City	State	Zip Code
	AUSTIN	TX	78758
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	4836 E. STATE HIGHWAY 71		
	City	State	Zip Code
	DEL VALLE	TX	78617
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
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| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 1300 E. 4TH STREET		Suite or Apartment Number
	City AUSTN	State TX	Zip Code 78702
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	92 RED RIVER STREET		
	City	State	Zip Code
	AUSTIN	TX	78701
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
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| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

Add Additional Municipal Question

Delete this page



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	715 S. EXPOSITION BLVD.		
	City	State	Zip Code
	AUSTIN	TX	78703
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 6401 FM 2222 RD.		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78730
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	5900 CAMERON ROAD		
	City	State	Zip Code
	AUSTIN	TX	78723
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	73 RAINEY STREET		
	City	State	Zip Code
	AUSTIN	TX	78701
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
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| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 600 N. LAMAR BLVD		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78703
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	8176 N. MOPAC EXPRESSWAY		
	City	State	Zip Code
	AUSTIN	TX	78759
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	712 CONGRESS AVENUE		
	City	State	Zip Code
	AUSTIN	TX	78701
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
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| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	601 W. 2ND STREET		
	City	State	Zip Code
	AUSTIN	TX	78701
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	E. WILLIAM CANNON & MCKINNEY FALLS PKWY		
	City	State	Zip Code
	AUSTIN	TX	78744
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	10400 RESEARCH BLVD.		
	City	State	Zip Code
	AUSTIN	TX	78759
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	2308 RIO GRANDE		
	City	State	Zip Code
	AUSTIN	TX	78705
Property Legal Description			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
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| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	ANDERSON MILL RD & N. FM 620		
	City	State	Zip Code
	AUSTIN	TX	78750
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|--|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☐ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☒ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

Add Additional Municipal Question

Delete this page



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	7731 MANCHACA ROAD		
	City	State	Zip Code
	AUSTIN	TX	78745
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	E. WILLIAM CANNON & MCKINNEY FALLS PKWY		
	City	State	Zip Code
	AUSTIN	TX	78744
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|---|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☐ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☐ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☐ Historic Preservation | ☐ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☐ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☐ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☐ Land Development or Land Use | ☐ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☐ Transportation or Mobility |
| ☐ Contracts or Procurement | ☐ Neighborhoods | ☐ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☐ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	321 W. 6TH STREET		
	City	State	Zip Code
	AUSTIN	TX	78701
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text" value="6121 FM 969"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78724"/>
	Property Legal Description		
	<input type="text"/>		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	2313 LAKE AUSTIN BLVD.		
	City	State	Zip Code
	AUSTIN	TX	78703
Property Legal Description			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	NEW CODE ANALYSIS
PROPERTY ADDRESS OR LEGAL DESCRIPTION	<div>☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.</div> <div><div>Address</div><div>Suite or Apartment Number</div><div>City</div><div>State</div><div>Zip Code</div><div>Property Legal Description</div></div>

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| ☐ Accessibility or Persons with Disabilities | ☐ Environmental Matters, Air or Water Quality, or Watershed Protection | ☐ Permits (Building, Site Plans) |
| ☐ Affordability | ☐ Finance, Budget, or Investments | ☐ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☐ Historic Preservation | ☐ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☐ Real Estate |
| ☐ City Infrastructure or Public Works | ☐ Labor or Workforce | ☐ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☐ Land Development or Land Use | ☐ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☐ Construction | ☐ Municipal Legislation | ☐ Transportation or Mobility |
| ☐ Contracts or Procurement | ☐ Neighborhoods | ☐ Zoning or Platting |
| ☐ Diversity, Equity, or Inclusion | ☐ Parks, Recreation, Libraries, or Museums | |
| ☐ Economic Development | ☒ Other: CODE ANALYSIS | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 220 FOREMOST DR.		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78745
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☐ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 2355 WINDY HILL		Suite or Apartment Number
	City Kyle	State TX	Zip Code 78640
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
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| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text" value="13501 N. IH 35"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78753"/>
Property Legal Description			
<input type="text"/>			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
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| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 1911 SAN ANTONIO ST.		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78705
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	7901 W. US 290		
	City	State	Zip Code
	JOHNSON CITY	TX	78636
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

Add Additional Municipal Question

Delete this page



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	E. PARKER LN. & HARRIS RIDGE BLVD.		
	City	State	Zip Code
	AUSTIN	TX	78754
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Property Legal Description		
	<input type="text" value="LOTS 7-12 BLOCK 31 AND LOTS 7-12 BLOCK 32 ORIGINAL CITY OF AUSTIN"/>		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☐ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	DEVELOPMENT OF PRACTICE FIELDS		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Property Legal Description		
	<input type="text" value="LOT 6A PARMER BUSINESS PARK AMENDED PLATS OF LOTS 5, 6, 8A AND 14A"/>		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☐ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☐ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	WOLF & PEARCE LN		
	City	State	Zip Code
	DEL VALLE	TX	78617
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☐ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	6506 DECKER LN		
	City	State	Zip Code
	AUSTIN	TX	78724
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
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| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 601 & 610 CARDINAL LANE		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78704
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text" value="3405 S. 1ST STREET"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78704"/>
Property Legal Description			
<input type="text"/>			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Property Legal Description		
	<input type="text" value="LOTS 6 AND 14 PARMER BUSINESS PARK"/>		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
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| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	WAYFINDING / MARKETING		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Property Legal Description		
	<input type="text"/>		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| ☐ Accessibility or Persons with Disabilities | ☐ Environmental Matters, Air or Water Quality, or Watershed Protection | ☐ Permits (Building, Site Plans) |
| ☐ Affordability | ☐ Finance, Budget, or Investments | ☐ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☐ Historic Preservation | ☐ Public Utilities, Energy, Water, Solid Waste, or Recycling |
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| ☐ Construction | ☐ Municipal Legislation | ☐ Transportation or Mobility |
| ☐ Contracts or Procurement | ☐ Neighborhoods | ☒ Zoning or Platting |
| ☐ Diversity, Equity, or Inclusion | ☐ Parks, Recreation, Libraries, or Museums | |
| ☐ Economic Development | ☒ Other: <input type="text" value="NEW CODE ANALYSIS"/> | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	NEW CODE ANALYSIS FOR SPECIFIC PROPERTY		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 2315 LAKE AUSTIN BLVD.		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78703
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|---|---|
| ☐ Accessibility or Persons with Disabilities | ☐ Environmental Matters, Air or Water Quality, or Watershed Protection | ☐ Permits (Building, Site Plans) |
| ☐ Affordability | ☐ Finance, Budget, or Investments | ☐ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☐ Historic Preservation | ☐ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
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| ☐ Contracts or Procurement | ☐ Neighborhoods | ☐ Zoning or Platting |
| ☐ Diversity, Equity, or Inclusion | ☐ Parks, Recreation, Libraries, or Museums | |
| ☐ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 204 E. 4TH STREET		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78701
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
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| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

Add Additional Municipal Question

Delete this page



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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	11755 RESEARCH BLVD		
	City	State	Zip Code
	AUSTIN	TX	78759
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	3940, 4032 AND 4040 S. LAMAR BLVD.		
	City	State	Zip Code
	AUSTIN	TX	78704
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 15204 N. FM 620		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78717
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	8112 SCENIC BROOK DRIVE		
	City	State	Zip Code
	AUSTIN	TX	78736
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 1225 S. PLEASANT VALLEY ROAD		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78741
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	835 W. 6TH STREET		
	City	State	Zip Code
	AUSTIN	TX	78703
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	1000 E. 41ST STREET		
	City	State	Zip Code
	AUSTIN	TX	78751
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	7733 BURLESON ROAD		
	City	State	Zip Code
	AUSTIN	TX	78744
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 1210 W. 5TH STREET		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78703
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	4713 E. CESAR CHAVEZ		
	City	State	Zip Code
	AUSTIN	TX	78702
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	5500 TRACOR LANE		
	City	State	Zip Code
	AUSTIN	TX	78725
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	11700 ROCK ROSE AVENUE		
	City	State	Zip Code
	AUSTIN	TX	78758
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

Add Additional Municipal Question

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 2: Municipal Question

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To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	13200-13300 CENTER LAKE DRIVE		
	City	State	Zip Code
	AUSTIN	TX	78753
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	13100-13200 MCCALLEN PASS		
	City	State	Zip Code
	AUSTIN	TX	78753
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	500 W ST. ELMO STREET		
	City	State	Zip Code
	AUSTIN	TX	78745
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	E. 6TH STREET		
	City	State	Zip Code
	AUSTIN	TX	78702
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	<input type="text" value="10549 W. HWY 71"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78735"/>
Property Legal Description			
<input type="text"/>			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: <input type="text"/> | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	500 W. ST. ELMO		
	City	State	Zip Code
	AUSTIN	TX	78745
Property Legal Description			

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
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| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address		Suite or Apartment Number
	E. 6TH STREET		
	City	State	Zip Code
	AUSTIN	TX	78702
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required.		
	Address 701 WEST 6TH ST.		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78701
	Property Legal Description		

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- | | | |
|---|--|--|
| ☐ Accessibility or Persons with Disabilities | ☒ Environmental Matters, Air or Water Quality, or Watershed Protection | ☒ Permits (Building, Site Plans) |
| ☒ Affordability | ☒ Finance, Budget, or Investments | ☒ Permits (Other) |
| ☐ Animals | ☐ Health, Healthcare, Mental Health, or Human Services | ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| ☐ Annexation | ☒ Historic Preservation | ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling |
| ☐ Arts, Music, Film, Cultural or Creative Industries | ☐ Hospitality, Tourism, Events, or Convention Center | ☐ Quality of Life Affairs |
| ☐ Aviation | ☐ Human Rights or Immigration | ☒ Real Estate |
| ☒ City Infrastructure or Public Works | ☐ Labor or Workforce | ☒ Rules, Proposed Rules, or Rule Making |
| ☐ Civil Service, Municipal Employment, or Retirement Systems | ☒ Land Development or Land Use | ☒ Taxation or Fees |
| ☒ Code Compliance | ☐ Municipal Court | ☐ Technology or Communications |
| ☒ Construction | ☐ Municipal Legislation | ☒ Transportation or Mobility |
| ☐ Contracts or Procurement | ☒ Neighborhoods | ☒ Zoning or Platting |
| ☒ Diversity, Equity, or Inclusion | ☒ Parks, Recreation, Libraries, or Museums | |
| ☒ Economic Development | ☐ Other: | |

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Delete this page



Lobbyist Reporting Form

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Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* CHRIS	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* PACITTI	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 300 W. 6TH STREET		Client Apartment or Suite Number STE 2300
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78701
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* less than \$10,000	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



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Section 3a: Client Information

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="KIPP AUSTIN"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="8509 FM 696"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78724"/>
	Nature of Client's Business* <input type="text" value="EDUCATION"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$0 (No Compensation Received)"/>	OR	(\$ Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

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NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title	Client First Name*	Middle
	Organization Name or Client Last Name, as applicable*		Client Suffix
	GALLEGOS		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*		Client Apartment or Suite Number
	5515 BALCONES DRIVE		
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78731
	Nature of Client's Business*		
	REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*	(\$)	Exact Amount
	\$0 (No Compensation Received)	OR	
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):		

* Indicates a required field

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* CIRRUS LOGIC, INC	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 800 W. 6TH		Client Apartment or Suite Number <input type="text"/>
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78701
	Nature of Client's Business* TECHNOLOGY		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$0 (No Compensation Received)	OR	(\$ Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

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NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* CARMA TEXAS, INC	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 11501 ALTERRA PKWY		Client Apartment or Suite Number STE 100
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78758
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* less than \$10,000	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* ENDEAVOR REAL ESTATE GROUP, LLC	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 500 W. 5TH STREET	Client Apartment or Suite Number STE 700	
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78701
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$10,000 - \$24,999	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="ORACLE"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="9515 TOWNE CENTRE DR."/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="SAN DIEGO"/>	Client State* <input type="text" value="CA"/>	Client Zip Code* <input type="text" value="92121"/>
	Nature of Client's Business* <input type="text" value="SOFTWARE APPLICATIONS"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$10,000 - \$24,999"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="QUALICO CR, L.P."/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="1440 THE LAKES BLVD"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="PFLUGERVILLE"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78660"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title	Client First Name*	Middle
	Organization Name or Client Last Name, as applicable*		Client Suffix
	YETI COOLER, INC		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*		Client Apartment or Suite Number
	5301 SOUTHWEST PARKWAY		STE 200
	Client City*	Client State*	Client Zip Code*
	AUSTTN	TX	78735
	Nature of Client's Business*		
	RETAILER		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*	(\$)	Exact Amount
	less than \$10,000	OR	
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="LINCOLN PROPERTY COMPANY"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="2000 MCKINNEY AVE"/>		Client Apartment or Suite Number <input type="text" value="STE 100"/>
	Client City* <input type="text" value="DALLAS"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="75201"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

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or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="REDLEAF HIGHLAND, LLC"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="4015 GUADALUPE ST"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78751"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$0 (No Compensation Received)"/>	OR	(\$ Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

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Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title	Client First Name*	Middle
	Organization Name or Client Last Name, as applicable*		Client Suffix
	STREAM REALTY		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*		Client Apartment or Suite Number
	515 CONGRESS AVE		STE 1300
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78701
	Nature of Client's Business*		
	REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*	(\$)	Exact Amount
	less than \$10,000	OR	
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

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Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text"/>	Client State* <input type="text"/>	Client Zip Code* <input type="text"/>
	Nature of Client's Business* <input type="text"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/>	(\$) Exact Amount <input type="text"/>
	less than \$10,000	OR
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.	
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>	

* Indicates a required field

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Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* BARSHOP & OLES COMPANY	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 901 S. MOPAC EXPRESWAY, Barton Springs Plaza II		Client Apartment or Suite Number Suite 550
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78746
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* less than \$10,000	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

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Delete this page



Lobbyist Reporting Form

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Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title	Client First Name*	Middle
	Organization Name or Client Last Name, as applicable*		Client Suffix
	HEB/ CHARLES BUTT (HOLDWORTH CENTER)		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*		Client Apartment or Suite Number
	646 SOUTH MAIN		
	Client City*	Client State*	Client Zip Code*
	SAN ANTONIO	TX	78204
	Nature of Client's Business*		
	REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*	(\$)	Exact Amount
	\$0 (No Compensation Received)	OR	
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="FASKEN OIL AND RANCH, LTD"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="3600 BEE CAVES ROAD"/>		Client Apartment or Suite Number <input type="text" value="STE 200"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78746"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$0 (No Compensation Received)"/>	OR	(\$ Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

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Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="HEB GROCERY STORES"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="646 SOUTH MAIN"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="SAN ANTONIO"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78204"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



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Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text"/>	Client State* <input type="text"/>	Client Zip Code* <input type="text"/>
	Nature of Client's Business* <input type="text"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/>	(\$) Exact Amount <input type="text"/>
	<input type="text"/> \$0 (No Compensation Received)	OR <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.	
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>	

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

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Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="AUSTIN BAPTIST CHURCH"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="823 CONGRESS AVE"/>	Client Apartment or Suite Number <input type="text" value="STE 111"/>	
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78701"/>
	Nature of Client's Business* <input type="text" value="RELIGIOUS ASSEMBLY"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

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Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="BLENHEIM CORPORATION"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="4716 ST. JOHN'S DR"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="DALLAS"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="75205"/>
	Nature of Client's Business* <input type="text" value="RESIDENTIAL REAL ESTATE ORGANIZATION"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



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Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="BROCK CONSULTING GROUP"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="P.O. BOX 160340"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78716"/>
	Nature of Client's Business* <input type="text" value="RESIDENTIAL REAL ESTATE ORGANIZATION"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

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Section 3: Client

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For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* CAPRIDGE PARTNERS, LLC	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 823 CONGRESS AVE		Client Apartment or Suite Number <input type="text"/>
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78701
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$0 (No Compensation Received)	OR	(\$ Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* CWS CAPITAL PARTNERS, LLC	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 9606 N. MOPAC EXPRESSWAY		Client Apartment or Suite Number STE 500
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78759
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* less than \$10,000	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title	Client First Name*	Middle
	Organization Name or Client Last Name, as applicable*		Client Suffix
	DOWNTOWN AUSTIN ALLIANCE		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*		Client Apartment or Suite Number
	211 E. 7TH STREET		STE 818
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78701
	Nature of Client's Business*		
	ADVOCACY ORGANIZATION		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*	(\$)	Exact Amount
	\$0 (No Compensation Received)	OR	
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="GABLES RESIDENTIAL"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="6850 AUSTIN CENTER BLVD."/>		Client Apartment or Suite Number <input type="text" value="STE 200"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78731"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$0 (No Compensation Received)"/>	OR	(\$ Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="HELPING HAND HOME FOR CHILDREN"/>		Client Suffix <input type="text"/>
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="3804 AVENUE B"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78751"/>
	Nature of Client's Business* <input type="text" value="NON-PROFIT"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="HPI REAL ESTATE & SERVICES INVESTMENT"/>		Client Suffix <input type="text"/>
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="3600 N. CAPITAL OF TEXAS HWY"/>		Client Apartment or Suite Number <input type="text" value="BLDG B, STE 250"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78746"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$0 (No Compensation Received)"/>	OR	(\$ Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* MAGELLAN DEVELOPMENT GROUP, LLC	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 225 N. COLUMBUS DRIVE	Client Apartment or Suite Number STE 100	
	Client City* CHICAGO	Client State* IL	Client Zip Code* 60601
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* less than \$10,000	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text"/>	Client Suffix <input type="text"/>	
	MEREDITH FAMILY REVOCABLE TRUST		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text"/>	Client Apartment or Suite Number <input type="text"/>	
	248 ADDIE ROY RD	STE C200	
	Client City* <input type="text"/>	Client State* <input type="text"/>	Client Zip Code* <input type="text"/>
	AUSTIN	TX	78746
	Nature of Client's Business* <input type="text"/>		
	REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/>	(\$) Exact Amount <input type="text"/>
	\$0 (No Compensation Received)	OR
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.	
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>	

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="PARKE PROPERTIES I, L.P"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="1411 SLEDGE DRIVE"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78734"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$0 (No Compensation Received)"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* ROBINSON RANCH	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* PO BOX 9556	Client Apartment or Suite Number <input type="text"/>	
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78766
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$10,000 - \$24,999	OR	(\$ Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text"/>	Client Suffix <input type="text"/>	
	RYAN STREET & ASSOCIATES		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text"/>		Client Apartment or Suite Number <input type="text"/>
	2414 EXPOSITION BLVD		STE B-140
	Client City* <input type="text"/>	Client State* <input type="text"/>	Client Zip Code* <input type="text"/>
	AUSTIN		TX
			78703
	Nature of Client's Business* <input type="text"/>		
	REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/>	(\$) Exact Amount <input type="text"/>
	\$0 (No Compensation Received)	OR
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.	
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>	

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* THE UNIVERSITY OF TEXAS SYSTEM		Client Suffix <input type="text"/>
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 201 WEST 7TH STREET		Client Apartment or Suite Number <input type="text"/>
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78701
	Nature of Client's Business* HIGHER EDUCATION		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$10,000 - \$24,999	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* TRAMMELL CROW	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 100 CONGRESS AVE	Client Apartment or Suite Number STE 225	
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78701
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$0 (No Compensation Received)	OR	(\$ Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* TRAVIS HOTEL GROUP, LLC	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 2711 N HASKELL AVE	Client Apartment or Suite Number STE 2800	
	Client City* DALLAS	Client State* TX	Client Zip Code* 75204
	Nature of Client's Business* HOSPITALITY		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$0 (No Compensation Received)	OR	(\$ Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* TRUDY'S TEXAS STAR, INC.	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 8133 MESA DR.	Client Apartment or Suite Number #206	
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78759
	Nature of Client's Business* RESTAURANTS		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$0 (No Compensation Received)	OR	(\$ Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

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or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* W&G PARTNERSHIP	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 2801 VIA FORTUNA	Client Apartment or Suite Number STE 525	
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78746
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$0 (No Compensation Received)	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

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or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="IDEA PUBLIC SCHOOLS"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="3901 SPEEDWAY"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78751"/>
	Nature of Client's Business* <input type="text" value="RELIGIOUS ASSEMBLY"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* MANIFOLD REAL ESTATE		Client Suffix <input type="text"/>
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* PO BOX 200463		Client Apartment or Suite Number <input type="text"/>
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78720
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* less than \$10,000	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* PRECOURT SPORTS VENTURES, LLC		Client Suffix <input type="text"/>
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 1 BLACK & GOLD BLVD		Client Apartment or Suite Number <input type="text"/>
	Client City* COLUMBUS	Client State* OH	Client Zip Code* 43211
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$10,000 - \$24,999	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="NRE EDGE, LLC"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="3100 MCKINNON STREET"/>		Client Apartment or Suite Number <input type="text" value="STE 250"/>
	Client City* <input type="text" value="DALLAS"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="75201"/>
	Nature of Client's Business* <input type="text" value="PROPERTY OWNER"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="BP RIVERSIDE WEST, LLC"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="3100 MCKINNON STREET"/>		Client Apartment or Suite Number <input type="text" value="STE 250"/>
	Client City* <input type="text" value="DALLAS"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="75201"/>
	Nature of Client's Business* <input type="text" value="PROPERTY OWNER"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
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Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="NRE TOWN LAKE PROPERTY OWNER, LLC"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="1801 CENTURY PARK WEST"/>		Client Apartment or Suite Number <input type="text" value="5TH FLOOR"/>
	Client City* <input type="text" value="LOS ANGELES"/>	Client State* <input type="text" value="CA"/>	Client Zip Code* <input type="text" value="90067"/>
	Nature of Client's Business* <input type="text" value="PROPERTY OWNER"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
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Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="BALLPARK AUSTIN, LLC"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="1801 CENTURY PARK WEST"/>		Client Apartment or Suite Number <input type="text" value="5TH FLOOR"/>
	Client City* <input type="text" value="LOS ANGELES"/>	Client State* <input type="text" value="CA"/>	Client Zip Code* <input type="text" value="90067"/>
	Nature of Client's Business* <input type="text" value="PROPERTY OWNER"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
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Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="NRE ZONE LLC"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="3100 MCKINNON STREET"/>		Client Apartment or Suite Number <input type="text" value="STE 250"/>
	Client City* <input type="text" value="DALLAS"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="75201"/>
	Nature of Client's Business* <input type="text" value="PROPERTY OWNER"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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Section 3a:
Client Information

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="RIVERSIDE RESOURCES"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="100 CONGRESS AVENUE"/>		Client Apartment or Suite Number <input type="text" value="STE 1450"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78701"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$0 (No Compensation Received)"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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Section 3a:
Client Information

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text"/>	Client State* <input type="text"/>	Client Zip Code* <input type="text"/>
	Nature of Client's Business* <input type="text"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/>	(\$) Exact Amount <input type="text"/>
	<input type="text"/> \$0 (No Compensation Received)	OR <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.	
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>	

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Section 3a:
Client Information

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title	Client First Name*	Middle
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Organization Name or Client Last Name, as applicable*	Client Suffix	
	<input type="text" value="TMINE, INC."/>	<input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*		Client Apartment or Suite Number
	<input type="text" value="9 W. 57TH STREET"/>		<input type="text"/>
	Client City*	Client State*	Client Zip Code*
	<input type="text" value="NEW YORK"/>	<input type="text" value="NY"/>	<input type="text" value="10019"/>
	Nature of Client's Business*		
	<input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*		(\$) Exact Amount
	<input type="text" value="less than \$10,000"/>	OR	<input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text"/>	Client State* <input type="text"/>	Client Zip Code* <input type="text"/>
	Nature of Client's Business* <input type="text"/>		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/>	(\$ Exact Amount <input type="text"/>
	<input type="text"/> \$0 (No Compensation Received)	OR <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.	
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>	

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Lobbyist Reporting Form
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Section 3:
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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="RED BLUFF PARTNERS, LLC"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="11036 ARROYO CANYON DRIVE"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78736"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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Add Another Client Page

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Section 3:
Client

Section 3a:
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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="SLATE REAL ESTATE PARTNERS"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="811 KATY FREEWAY I"/>		Client Apartment or Suite Number <input type="text" value="STE 925"/>
	Client City* <input type="text" value="HOUSTON"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="77024"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$25,000 - \$49,999"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

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Section 3:
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Section 3a:
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For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="KARLIN REAL ESTATE LLC"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="500 W. 2ND STREET"/>		Client Apartment or Suite Number <input type="text" value="STE 1400"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78701"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$10,000 - \$24,999"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* CLARENDON COMPANY, LLC	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* P.O. BOX 530255		Client Apartment or Suite Number <input type="text"/>
	Client City* ATLANTA	Client State* GA	Client Zip Code* 30353
	Nature of Client's Business* REAL ESTATE/ DEVELOPMENT		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$25,000 - \$49,999	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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Lobbyist Reporting Form

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Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text"/> RYAN COMPANIES, INC		Client Suffix <input type="text"/>
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text"/> 100 CONGRESS AVE		Client Apartment or Suite Number <input type="text"/> STE 100
	Client City* <input type="text"/> AUSTIN	Client State* <input type="text"/> TX	Client Zip Code* <input type="text"/> 78701
	Nature of Client's Business* <input type="text"/> REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/> less than \$10,000	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* GREYSTAR GP II, LLC	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 6300 BRIDGE POINT PKWY	Client Apartment or Suite Number BLDG 3, STE 300	
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78730
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$0 (No Compensation Received)	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* DAVID	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* BOOTH	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 4929 RANCH ROAD 2222		Client Apartment or Suite Number <input type="text"/>
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78731
	Nature of Client's Business* PROPERTY OWNER		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* less than \$10,000	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* CENTRAL MACHINE OPERATING COMPANY LLC	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 4826 E. CESAR CHAVEZ		Client Apartment or Suite Number <input type="text"/>
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78702
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$0 (No Compensation Received)	OR	(\$ Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text"/>	Client State* <input type="text"/>	Client Zip Code* <input type="text"/>
	Nature of Client's Business* <input type="text"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/>	(\$) Exact Amount <input type="text"/>
	less than \$10,000	OR
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.	
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>	

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
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Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text"/>	Client State* <input type="text"/>	Client Zip Code* <input type="text"/>
	Nature of Client's Business* <input type="text"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/>	(\$) Exact Amount <input type="text"/>
	<input type="text"/> \$0 (No Compensation Received)	OR <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.	
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>	

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Section 3:
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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title	Client First Name*	Middle
	<input type="text"/>	<input type="text"/>	<input type="text"/>
CLIENT ADDRESS AND NATURE OF BUSINESS	Organization Name or Client Last Name, as applicable*		Client Suffix
	<input type="text" value="PURE REAL ESTATE PARTNERS, LP"/>		<input type="text"/>
	Client Business Address*		Client Apartment or Suite Number
	<input type="text" value="5515 BALCONES DRIVE"/>		<input type="text"/>
	Client City*	Client State*	Client Zip Code*
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78731"/>
	Nature of Client's Business*		
	<input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*	(\$)	Exact Amount
	<input type="text" value="\$0 (No Compensation Received)"/>	OR	<input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="11E5, LLC"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="501 NORTH IH-35"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78702"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

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Section 3a:
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For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="VELOCITY CREDIT UNION"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="610 E. 11TH STREET"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78701"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$0 (No Compensation Received)"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="THE SPIRITED GROUP"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="515 WEST 7TH STREET"/>		Client Apartment or Suite Number <input type="text" value="STE 300"/>
	Client City* <input type="text" value="LOS ANGELES"/>	Client State* <input type="text" value="CA"/>	Client Zip Code* <input type="text" value="90014"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

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Section 3a:
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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* VALOR TEXAS EDUCATION FOUNDATION		Client Suffix <input type="text"/>
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 220 FOREMOST DRIVE		Client Apartment or Suite Number <input type="text"/>
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78745
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$0 (No Compensation Received)	OR	(\$ Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text" value="KIP"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="MCCLANAHAN"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="2415 EAST 5TH STREET"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78702"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$0 (No Compensation Received)"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text"/>	Client State* <input type="text"/>	Client Zip Code* <input type="text"/>
	Nature of Client's Business* <input type="text"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/>	(\$) Exact Amount <input type="text"/>
	<input type="text"/> \$0 (No Compensation Received)	OR <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.	
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>	

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title	Client First Name*	Middle
CLIENT ADDRESS AND NATURE OF BUSINESS	Organization Name or Client Last Name, as applicable*		Client Suffix
	IRONWOOD REAL ESTATE		
	Client Business Address*		Client Apartment or Suite Number
	207 SAN JACINTO BLVD.		STE. 300
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78701
	Nature of Client's Business*		
	REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*		(\$) Exact Amount
	\$10,000 - \$24,999	OR	
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):		

* Indicates a required field

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title	Client First Name*	Middle
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Organization Name or Client Last Name, as applicable*	Client Suffix	
	<input type="text" value="KELLY SLATER WAVE CO."/>	<input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*		Client Apartment or Suite Number
	<input type="text" value="120 S. SIERRA AVENUE"/>		<input type="text" value="STE 100"/>
	Client City*	Client State*	Client Zip Code*
	<input type="text" value="SOLANA BEACH"/>	<input type="text" value="CA"/>	<input type="text" value="92075"/>
	Nature of Client's Business*		
	<input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*	(\$)	Exact Amount
	<input type="text" value="\$0 (No Compensation Received)"/>	OR	<input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="WALLER CREEK OWNER LLC"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="115 W. 18TH STREET"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="NEW YORK"/>	Client State* <input type="text" value="NY"/>	Client Zip Code* <input type="text" value="10011"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$10,000 - \$24,999"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="MSD CAPITAL, L.P."/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="100 WILSHIRE BLVD."/>		Client Apartment or Suite Number <input type="text" value="STE 1700"/>
	Client City* <input type="text" value="SANTA MONICA"/>	Client State* <input type="text" value="CA"/>	Client Zip Code* <input type="text" value="90401"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$0 (No Compensation Received)"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* GOOGLE, INC.	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 1600 AMPHITHEATRE PKWY		Client Apartment or Suite Number <input type="text"/>
	Client City* MOUNTAIN VIEW	Client State* CA	Client Zip Code* 94043
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$0 (No Compensation Received)	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="CA VENTURES"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="130 E RANDOLPH STREET"/>		Client Apartment or Suite Number <input type="text" value="STE 2100"/>
	Client City* <input type="text" value="CHICAGO"/>	Client State* <input type="text" value="IL"/>	Client Zip Code* <input type="text" value="60601"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="KAIROI RESIDENTIAL"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="12117 BEE CAVE ROAD"/>		Client Apartment or Suite Number <input type="text" value="STE 202"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78738"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

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For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="BAIZER INTERESTS, INC."/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="2313 Lake Austin Blvd"/>		Client Apartment or Suite Number <input type="text" value="STE 300"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78703"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="BRIDGES REAL ESTATE LLC"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="P.O. BOX 1893"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="BASTROP"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78602"/>
	Nature of Client's Business* <input type="text" value="NEW CITY CODE ANALYSIS"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$0 (No Compensation Received)"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title	Client First Name*	Middle
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Organization Name or Client Last Name, as applicable*	Client Suffix	
	<input type="text" value="BUILDING HOPE PREDEVELOPMENT LLC"/>	<input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*		Client Apartment or Suite Number
	<input type="text" value="910 17TH STREET NW"/>		<input type="text" value="STE 1100"/>
	Client City*	Client State*	Client Zip Code*
	<input type="text" value="WAHSINGTON"/>	<input type="text" value="DC"/>	<input type="text" value="20006"/>
	Nature of Client's Business*		
	<input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*	(\$)	Exact Amount
	<input type="text" value="\$0 (No Compensation Received)"/>	OR	<input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="HYDE PARK BAPTIST CHURCH"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="3901 SPEEDWAY"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78751"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* JOHN	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* SCOTT	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 11036 ARROYO CANYON DRIVE		Client Apartment or Suite Number <input type="text"/>
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78736
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* \$0 (No Compensation Received)	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="OBMSMG LLC"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="250 N HARTFORD AVE"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="COLUMBUS"/>	Client State* <input type="text" value="OH"/>	Client Zip Code* <input type="text" value="43222"/>
	Nature of Client's Business* <input type="text" value="WAYFINDING/MARKETING"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$0 (No Compensation Received)"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="TESLA"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="1333 H STREET NW"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="Washington"/>	Client State* <input type="text" value="DC"/>	Client Zip Code* <input type="text" value="20005"/>
	Nature of Client's Business* <input type="text" value="ALTERNATE ENERGY / AUTO MANUFACTURING"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$25,000 - \$49,999"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="SCHMIDT INVESTMENTS"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="2226 STATE ROAD 580"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="CLEARWATER"/>	Client State* <input type="text" value="FL"/>	Client Zip Code* <input type="text" value="33763"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* GBD PROPERTIES, INC.	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 550 BOWIE ST.		Client Apartment or Suite Number <input type="text"/>
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78703
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* less than \$10,000	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="CENTERSTATE 99, LTD."/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="301 CONGRESS AVE"/>		Client Apartment or Suite Number <input type="text" value="STE 1390"/>
	Client City* <input type="text" value="AUSTIN"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78701"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="GCH SAINT ELMO LLC"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="2579 W. MAIN STREET"/>		Client Apartment or Suite Number <input type="text" value="STE 201"/>
	Client City* <input type="text" value="LITTLETON"/>	Client State* <input type="text" value="CO"/>	Client Zip Code* <input type="text" value="80120"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* DOMAIN NORTHSIDE RETAIL PROPERTY OWNER, LP	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* 11821 ROCK ROSE AVENUE		Client Apartment or Suite Number STE 142
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78758
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* less than \$10,000	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text"/>	Client Suffix <input type="text"/>	
	TRAVIS COUNTY WCID NO. 20		
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text"/>	Client Apartment or Suite Number <input type="text"/>	
	100 CONGRESS AVE.	STE 1300	
	Client City* <input type="text"/>	Client State* <input type="text"/>	Client Zip Code* <input type="text"/>
	AUSTIN	TX	78701
	Nature of Client's Business* <input type="text"/>		
	LOCAL GOVERNMENT/UTILITY SERVICES		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text"/>	(\$) Exact Amount <input type="text"/>
	less than \$10,000	OR
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.	
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>	

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title	Client First Name*	Middle
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Organization Name or Client Last Name, as applicable*	Client Suffix	
	<input type="text" value="TRAVIS COUNTY MUNICIPAL UTILITY DISTRICT NO. 4"/>	<input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*		Client Apartment or Suite Number
	<input type="text" value="100 CONGRESS AVE."/>		<input type="text" value="STE 1300"/>
	Client City*	Client State*	Client Zip Code*
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78701"/>
	Nature of Client's Business*		
	<input type="text" value="LOCAL GOVERNMENT/UTILITY SERVICES"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*		(\$)	Exact Amount
	<input type="text" value="less than \$10,000"/>	OR	<input type="text"/>	
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.			
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>			

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 3:
Client

Section 3a:
Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period		
CLIENT NAME	Client Title <input type="text"/>	Client First Name* <input type="text" value="JOHN"/>	Middle <input type="text"/>
	Organization Name or Client Last Name, as applicable* <input type="text" value="SCOTT"/>	Client Suffix <input type="text"/>	
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address* <input type="text" value="405 West 14th Street"/>		Client Apartment or Suite Number <input type="text"/>
	Client City* <input type="text" value="Austin"/>	Client State* <input type="text" value="TX"/>	Client Zip Code* <input type="text" value="78701"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

Section 3b:
Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category* <input type="text" value="\$0 (No Compensation Received)"/>	OR	(\$) Exact Amount <input type="text"/>
	Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling \$500,000 or more.		
	If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max): <input type="text"/>		

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 4: Employee

For each person employed or retained by the individual lobbyist for the purpose of assisting in or preparing for lobbying (excluding purely clerical or administrative assistance), provide a separate page with the information below (City Code Section 4-8-5(B)(4)(c)). If the lobbyist has retained no employees, leave this page blank.

For additional employees, click "Add Another Employee Page" below.

NO EMPLOYEES TO REPORT	☐ I employed or retained no employees during the applicable reporting period		
PERSON EMPLOYED OR RETAINED	Title	First Name*	Middle
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Last Name*	Suffix	
	<input type="text"/>	<input type="text"/>	
	Employer*	Occupation*	
	<input type="text"/>	<input type="text"/>	
BUSINESS ADDRESS	Business Address*	Apartment or Suite Number	
	<input type="text"/>	<input type="text"/>	
	City*	State*	Zip Code*
	<input type="text"/>	<input type="text"/>	<input type="text"/>
MAYOR/COUNCIL RELATIVE OR HOUSEHOLD MEMBER	☐ Is the person identified above related (within the third degree of consanguinity) to the Mayor or a Council Member, or a member of their household, as defined in City Code Section 4-8-6(A)(5)? If yes, describe the nature of their employment *required if the above box is checked <input type="text"/>		
	First Name of Mayor/Council Member	Last Name of Mayor/Council Member	
	<input type="text"/>	<input type="text"/>	

* Indicates a required field

Add Another Employee Page

Delete this page

Lobbyist Reporting Form

*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Sections 5, 6 and 7 are for filing Quarterly Activity Reports or a Termination of Lobbyist Registration.

If you are not submitting this form during a quarterly activity reporting deadline or to terminate your lobbyist registration, proceed directly to Section 8: Declaration and Electronic Submission.

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

**Section 5:
Statement of
No Activity**

STATEMENT OF NO EXPENDITURES MADE AND NO COMPENSATION RECEIVED

Lobbyists who have no reportable activity for the reporting period must submit a Statement of No Activity to the Clerk's Office (City Code Section 4-8-6(D)).

By checking the No Activity Confirmation, I affirm that I have no reportable activity during this reporting period, as defined by the four conditions below.

- I received no Client Compensation during this activity period (§4-8-6(A)(2)).
- I made no Expenditures for lobbying during this activity period (§4-8-6(A)(3)).
- I have not exchanged money, goods, services, or anything of value totaling more than \$500 with a business entity in which a City Official has a substantial economic interest during this reporting period (§4-8-6(A)(4)).
- I have no employees who are household members or related (within third degree of consanguinity or affinity) to the Mayor or a Council Member to report during this reporting period (§4-8-6(A)(5)).

No Activity Confirmation

☐ I have read the four conditions above and confirm that I have no reportable activity to disclose during this reporting period

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 6:
Expenditure Totals

Provide the total amount of expenditures for lobbying, sub-totaled by the categories listed below. A blank value will be interpreted as \$0 spent in that particular category (§4-8-6(A)(3)).

Cumulative expenditures of more than \$50 by an individual lobbyist per day per City Official in the expense categories listed below must be itemized on an Expenditure page.

EXPENDITURE TOTALS (Blank values will be interpreted as \$0)	(\$) Reimbursement to Others	<input type="text"/>
	(\$) Food and Beverages	<input type="text"/>
	(\$) Transportation and Lodging	<input type="text"/>
	(\$) Gifts (other than Awards and Mementos)	<input type="text"/>
	(\$) Entertainment	<input type="text"/>
	(\$) Awards and Mementos	<input type="text"/>
	(\$) Honorariums	<input type="text"/>
	(\$) Attendance of Council Members at Charitable Events or Fundraisers	<input type="text"/>
	(\$) Media Communications (broadcast, print, advertising, etc.)	<input type="text"/>
	(\$) Payments to persons who assist with Media Communications as defined in §4-8-6(A)(3)(j)	<input type="text"/>

Lobbyist Reporting Form

*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

Section 7: Expenditure

For each itemized expenditure, provide a separate page with the information below. Cumulative expenditures of more than \$50 per day per City Official in the expense categories provided below must be itemized on an Expenditure Page (§4-8-6(A)(3)).

Per §4-8-6(A)(4), exchanges of money, goods, services, or anything of value to a business or business interest of a City Official that total \$500 or more during the reporting period must also be itemized on an Expenditure Page.

For additional expenditures, click "Add Another Expenditure Page" below.

PAYEE NAME AND BUSINESS INTEREST	Payee Title	Payee First Name*		
	<input type="text"/>	<input type="text"/>		
	Organization Name or Payee Last Name, as applicable*		Payee Suffix	
	<input type="text"/>		<input type="text"/>	
	☐ This payee is a business or business interest of a City Official If yes, First Name of City Official <input type="text"/> Last Name of City Official <input type="text"/>			
Department of City Official		Job Title of City Official		
<input type="text"/>		<input type="text"/>		
PAYEE ADDRESS	Payee Address/ PO Box*		Payee Apartment or Suite Number	
	<input type="text"/>		<input type="text"/>	
	Payee City*	Payee State*	Payee Zip Code*	
	<input type="text"/>	<input type="text"/>	<input type="text"/>	
EXPENDITURE DETAILS	(\$) Expenditure Amount*	Expenditure Date*	Category*	
	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	Purpose of the Expenditure*			
<input type="text"/>				

Identify each City Official who benefitted from or who may have been influenced by the expenditure, if applicable

City Official First Name	City Official Last Name	Department	Job Title

Add Another Expenditure Page

Delete this page

Lobbyist Reporting Form
*Required for Lobbyist Registration, Termination,
or Quarterly Activity Reporting*

**Section 8:
Declaration and
Electronic Submission**

DECLARATION

By my signature below and subject to the penalty of perjury, I swear or affirm that the facts provided in this Lobbyist Reporting Form are true and correct to the best of my knowledge and belief and include all information required to be reported by me pursuant to City Code, Chapter 4-8.

I understand that pursuant to §4-8-9(E) of the Austin City Code, this report is made under oath regardless of whether there is any jurat or affidavit of verification, including a signature.

MR. G. FERRIS CLEMENTS

Typed Name

4/12/2021

Report Date*

Electronic Submission and Signature

- ☒ I have completed a Lobbyist Contact Information Form, and my signature and e-mail address are both on file at the City Clerk's Office.

New or Renewing Lobbyist Registrations are not considered complete until the appropriate registration fee has been paid. If you are registering for the first time as a lobbyist or are renewing your annual registration, you must remit payment via cash, check, or money order.