FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00090447 3 COMMITTEE NAME **OFFICE USE ONLY Austin Apartment Association** Date Received **ELECTRONICALLY FILED** 08/04/2021 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 8620 Burnet Road #475 Change of Address Austin, TX 78757 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount **Emily** NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Blair CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 8620 Burnet Road STREET **ADDRESS** #475 (Residence or Business) Austin, TX 78757 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** MAILING **ADDRESS** Change of Address TX **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 323-0990 x101 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 X August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 06/26/2021 07/25/2021

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

		-		
2 COMMITTEE NAME				
Austin Apartment Association			00090447	
A CTIVITY	ndidates A. Sup	ported		
(identity t	by name or, if le, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)	В. Орр	osed		
2. Mea	asures A. Sup	norted		
(Describe	e by date and location	porteu		
of election	on and nature of issue.)			
	В. Орр	osed		
2 0#	iocholdoro			
Ass (Identify t	iceholders sisted by name or, if e, classify by party.)			
		ICAL CONTRIBUTIONS (OTHER THAN		
TOTALS PLE	EDGES, LOANS, OR GUA		\$	0.00
	TAL POLITICAL CON THER THAN PLEDGES, L	TRIBUTIONS OANS, OR GUARANTEES OF LOANS)	\$	398.00
EXPENDITURE 3. TO	TAL POLITICAL EXPEND	DITURES OF \$10 OR LESS, UNLESS ITEM	IZED \$	0.00
4. ТО	TAL POLITICAL EXPE	ENDITURES	\$	0.00
	TAL POLITICAL CONTRII THE REPORTING PERIC	BUTIONS MAINTAINED AS OF THE LAST DD	DAY \$	113,472.20
	TAL PRINCIPAL AMOUN ST DAY OF THE REPORT	T OF ALL OUTSTANDING LOANS AS OF TING PERIOD	THE \$	0.00
6 AFFIDAVIT				
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Emil	y Blair	
		Signature of Ca	mpaign Treasur	rer
AFFIX NOTARY STAMP	' / SEAL ABOVE			
Sworn to and subscribed before r	me, by the said	, tl	his the	day
		itness my hand and seal of office.		
Signature of officer administeri	ing oath Printed	name of officer administering oath	Title of offic	er administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

3 of 6

					3 01 0
	MMITTE	(Eth	ics Commission Filers)		
19 SCI	HEDULI	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	398.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	Х	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	TION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (DRGANIZATION	\$	
9.	X	SCHEDULE E: LOANS		\$	0.00
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	0.00
11.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/6
2	FILER NAME Austin Apart	ment Association		3 Filer ID (Ethics Commission Filers) 00090447
4	Date 06/29/2021	 Full name of contributor out-of-state PAC (ID#:_Eckhardt, Sandy Contributor address; City; State; Zip Code 809 Charleston Blvd. Taylor, TX 76574 	7 Amount of Contribution (\$) \$99.00	
8	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions None	s)
	Date 07/02/2021	Full name of contributor out-of-state PAC (ID#:_ Garcia, Michael Contributor address; City; State; Zip Code 212 Stewart Dr Hutto, TX 78634		Amount of Contribution (\$) \$99.00
	Principal occu Regional Ma	pation / Job title (See Instructions) anager	Employer (See Instructions Roscoe Property Mana	
	Date 06/29/2021	Full name of contributor out-of-state PAC (ID#:_ Russell, Paige Contributor address; City; State; Zip Code 8519 Selway Drive Austin, TX 78637		Amount of Contribution (\$) \$150.00
	Principal occu Regional Ma	pation / Job title (See Instructions) anager	Employer (See Instructions CREA	5)
	Date 06/29/2021	Full name of contributor out-of-state PAC (ID#:_ Taylor, Carol Contributor address; City; State; Zip Code 23422 LUTHERAN CEMETERY RD Tomball, TX 77377		Amount of Contribution (\$) \$50.00
	Principal occu Project Mana	pation / Job title (See Instructions) ager	Employer (See Instructions Centex Construction	5)

PLE	DGED CONTRIBU	TIONS			SCHEDULE	В	
The Instruction Guide explains how to complete this form.				1	Total pages Schedule B: Sch: 1/1 Rpt: 5/6		
2 FILER NAME				3	Filer ID (Ethics Commission Filers)		
<u></u>	partment Association	250		+	00090447	0.00	
	OF UNITEMIZED PLEDO					0.00	
5 Date	6 Full name of pledgor	out-of-state PAC (II	D#:	_) 8	Amount of pledge (\$) In-kind description (If applicable)		
	7 Pledgor Address;	City; State; Zip Co	de				
]	Check if travel outside of Texas. Complete Sche	dule T	
10 Principal	occupation / Job title (See Instru	uctions)	11 Employer (See In	structi	ons)		

	LOANS					SCHED	ULE E
	The Instruction Guide explains how to complete this form					ages Schedule E: ./1 Rpt: 6/6	
	2 FILER NAME Austin Apartment Association				3 Filer ID (Ethics Commission Filers) 00090447		
4	TOTAL OF UN	IITEMIZED LOANS			•	\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (S	B)
	Is lender a financial institution?	8 Lender address; City	y; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruction	s)		
14	Description of Coll None	ateral		15 Check if personal funds w	ere deposite	ed into political accour (See Instruction	
	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guarar	nteed (\$)
	not applicable	18 Guarantor address; City	y; State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instruction	s)	1	