

# MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC  
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090447		2 Total pages filed: 9	
3 COMMITTEE NAME Austin Apartment Association				OFFICE USE ONLY Date Received ELECTRONICALLY FILED 12/06/2021 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 8620 Burnet Road #475 Austin, TX 78757				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Emily NICKNAME LAST SUFFIX Blair				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 8620 Burnet Road #475 Austin, TX 78757				
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE TX				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 323-0990 x101				
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)				
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input checked="" type="checkbox"/> December 5				
11 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 10/26/2021    11/25/2021				

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# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Austin Apartment Association	<b>13 Filer ID</b> (Ethics Commission Filers) 00090447
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,800.00
EXPENDITURE TOTALS	<b>3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 500.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 13,068.20
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00

<b>16 AFFIDAVIT</b>	<p>I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.</p> <p>Emily Blair</p> <p>_____ Signature of Campaign Treasurer</p> <p>AFFIX NOTARY STAMP / SEAL ABOVE</p> <p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p> <p>_____ Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath</p>
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**SUBTOTALS - MPAC****FORM MPAC**  
**COVER SHEET PG 3**  
3 of 9

<b>17 COMMITTEE NAME</b> Austin Apartment Association		<b>18 Filer ID</b> (Ethics Commission Filers) 00090447
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,800.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 500.00
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/4 Rpt: 4/9
<b>2</b> FILER NAME Austin Apartment Association		<b>3</b> Filer ID (Ethics Commission Filers) 00090447
<b>4</b> Date 10/26/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burleson, Kris <hr/> <b>6</b> Contributor address; City; State; Zip Code 2212 Lookout Range Drive  Leander, TX 78641	<b>7</b> Amount of Contribution (\$)  \$600.00
<b>8</b> Principal occupation / Job title (See Instructions) Regional VP		<b>9</b> Employer (See Instructions) Inter Solutions Staffing
Date 10/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Scott <hr/> Contributor address; City; State; Zip Code 6801 Beckett Rd Unit 127L Ausitn, TX 78747	Amount of Contribution (\$)  \$600.00
Principal occupation / Job title (See Instructions) Marketing Director		Employer (See Instructions) ICM Public Adjusting
Date 10/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Leon, Eric <hr/> Contributor address; City; State; Zip Code 7210 Elusive Pass  San Antonio, TX 78233	Amount of Contribution (\$)  \$600.00
Principal occupation / Job title (See Instructions) Sales Representative		Employer (See Instructions) Global Restoration Services
Date 11/03/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fail, Clinton <hr/> Contributor address; City; State; Zip Code 1265 Forest Green Drive  Kennedale , TX 76060	Amount of Contribution (\$)  \$600.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) AZ Parts Master
Date 11/02/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Rene <hr/> Contributor address; City; State; Zip Code 2913 Wadsworth Way  Austin, TX 78748	Amount of Contribution (\$)  \$600.00
Principal occupation / Job title (See Instructions) Owner/Manager		Employer (See Instructions) Platinum Pools

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/4 Rpt: 5/9
<b>2</b> FILER NAME Austin Apartment Association		<b>3</b> Filer ID (Ethics Commission Filers) 00090447
<b>4</b> Date 10/27/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frost, Hunter <hr/> <b>6</b> Contributor address; City; State; Zip Code 21307 Martin Lane  Pflugerville, TX 78660	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions) Project Manager		<b>9</b> Employer (See Instructions) Integrity Paving and Coatings
Date 11/02/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gebhart, Carrie <hr/> Contributor address; City; State; Zip Code 10101 Fountaingate Drive  Stafford, TX 77477	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Redi Carpet
Date 11/03/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Scott <hr/> Contributor address; City; State; Zip Code 13709 Camp Comfort Lane  Austin, TX 78717	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Sundek of Austin
Date 11/02/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isbell, Jarrett <hr/> Contributor address; City; State; Zip Code 311 Bowie St #2508 Austin, TX 78703	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Contractors Inc.
Date 11/02/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justin, Richard <hr/> Contributor address; City; State; Zip Code 824 Camino la costa  Austin, TX 78752	Amount of Contribution (\$)  \$600.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Clifton Heights Constructions

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/4 Rpt: 6/9
<b>2</b> FILER NAME Austin Apartment Association		<b>3</b> Filer ID (Ethics Commission Filers) 00090447
<b>4</b> Date 11/02/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Eric <b>6</b> Contributor address; City; State; Zip Code 547 Peakside Circle Dripping Springs, TX 78620	<b>7</b> Amount of Contribution (\$) \$300.00
<b>8</b> Principal occupation / Job title (See Instructions) VP of Sales		<b>9</b> Employer (See Instructions) We Do Trash
Date 11/01/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lusk, Mat Contributor address; City; State; Zip Code 16318 Military Drive Shavano Park, TX 78231	Amount of Contribution (\$) \$1,200.00
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) Impact Floors
Date 11/01/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mast, Aaron Contributor address; City; State; Zip Code 2121 Lohman's Crossing #504 Lakeway, TX 78734	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Property Doctor Services
Date 11/03/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moerbe, Lee Contributor address; City; State; Zip Code 161 Logan Ranch Georgetown, TX 78628	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Lone Star Carpet
Date 10/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Needham, Teri Contributor address; City; State; Zip Code 12521 Belcara Place Austin, TX 78732	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Operations Manager		Employer (See Instructions) PS Landscapes

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/4 Rpt: 7/9
<b>2</b> FILER NAME Austin Apartment Association		<b>3</b> Filer ID (Ethics Commission Filers) 00090447
<b>4</b> Date 11/02/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Revis, Russell <hr/> <b>6</b> Contributor address; City; State; Zip Code 2810 Sandpebble Court  Seabrook, TX 77586	<b>7</b> Amount of Contribution (\$)  \$900.00
<b>8</b> Principal occupation / Job title (See Instructions) Sales Director		<b>9</b> Employer (See Instructions) Behr
Date 11/02/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Robyn <hr/> Contributor address; City; State; Zip Code 18309 Lura Lane  Jonestown, TX 78645	Amount of Contribution (\$)  \$600.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Valor Fire Protection
Date 11/03/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Paige <hr/> Contributor address; City; State; Zip Code 8519 Selway Drive  Austin, TX 78637	Amount of Contribution (\$)  \$600.00
Principal occupation / Job title (See Instructions) Regional Manager		Employer (See Instructions) CREA
Date 11/02/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Haydee <hr/> Contributor address; City; State; Zip Code 8905 Spurflower Cove  Austin, TX 78759	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Business Development Manager		Employer (See Instructions) BG Multifamily
Date 11/01/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Kendall <hr/> Contributor address; City; State; Zip Code PO Box 561  Buda, TX 78610	Amount of Contribution (\$)  \$600.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) HB Supply

# PLEDGED CONTRIBUTIONS

## SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 1/1 Rpt: 8/9

2 FILER NAME

Austin Apartment Association

3 Filer ID (Ethics Commission Filers)  
00090447

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: \_\_\_\_\_)

7 Pledgor Address; City; State; Zip Code

8 Amount of  
pledge (\$)

9 In-kind description  
(If applicable)

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 9/9	2 FILER NAME Austin Apartment Association	3 Filer ID (Ethics Commission Filers) 00090447
4 Date 10/27/2021	5 Payee name Howard, Ann (Commissioner)	
6 Amount (\$) \$500.00  <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 5674  Austin, TX 78763	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) General Campaign Contribution	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Attend Fund Raising Event.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held