

FORM MPAC
COVER SHEET PG 1

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Austin Apartment Association		13 Filer ID (Ethics Commission Filers) 00090447	
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Kirk Watson Mayor	
		B. Opposed	
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
		B. Opposed	
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		
	15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,050.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	100,591.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Emily Blair

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

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

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Caroline Harris State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Carrie Issac State Representative
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

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12 COMMITTEE NAME

Austin Apartment Association

13 Filer ID

(Ethics Commission Filers)

00090447

**14 COMMITTEE
ACTIVITY**

(Attach lists on plain
paper to complete this
report if necessary.)

1. Candidates

(Identify by name or, if
applicable, classify by party.)

A. Supported Ellen Troxclair State Representative

B. Opposed

2. Measures

(Describe by date and
location of election and
nature of issue.)

A. Supported

B. Opposed

**3. Officeholders
Assisted**

(Identify by name or, if
applicable, classify by party.)

SUBTOTALS - MPAC**FORM MPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Austin Apartment Association		18 Filer ID (Ethics Commission Filers) 00090447
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="checked" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,050.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/3 Rpt: 6/8
2 FILER NAME Austin Apartment Association		3 Filer ID (Ethics Commission Filers) 00090447
4 Date 10/25/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grimes, Steven <hr/> 6 Contributor address; City; State; Zip Code 8103 Broadie Ln Ausitn, TX 78745	7 Amount of Contribution (\$) \$600.00
8 Principal occupation / Job title (See Instructions) emp		9 Employer (See Instructions) Apex Multifamliy Builders
Date 10/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Chris <hr/> Contributor address; City; State; Zip Code 19809 Cajuales Ct Pflugerville, TX 78660	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) emp		Employer (See Instructions) Behr Paint Company
Date 10/25/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Chris <hr/> Contributor address; City; State; Zip Code 19809 Cajuales Ct Pflugerville, TX 78660	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) emp		Employer (See Instructions) Behr Paint Company
Date 09/28/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard, Eric <hr/> Contributor address; City; State; Zip Code 547 Peakside Circle Dripping Springs, TX 78620	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) VP of Sales		Employer (See Instructions) We Do Trash
Date 10/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lestus, Laura <hr/> Contributor address; City; State; Zip Code 1310 Lilley Yeager Loop North Cleveland, TX 77328	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) emp		Employer (See Instructions) The Liberty Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 7/8
2 FILER NAME Austin Apartment Association		3 Filer ID (Ethics Commission Filers) 00090447
4 Date 10/19/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Needham, Teri <hr/> 6 Contributor address; City; State; Zip Code 12521 Belcara Place Austin, TX 78732	7 Amount of Contribution (\$) \$600.00
8 Principal occupation / Job title (See Instructions) Operations Manager		9 Employer (See Instructions) PS Landscapes
Date 09/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon, Marrisie <hr/> Contributor address; City; State; Zip Code 4902 Allison Cv Austin, TX 78741	Amount of Contribution (\$) \$1,200.00
Principal occupation / Job title (See Instructions) Business Development Mngr		Employer (See Instructions) Impact Floors
Date 10/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nixon, Marrisie <hr/> Contributor address; City; State; Zip Code 4902 Allison Cv Austin, TX 78741	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Business Development Mngr		Employer (See Instructions) Impact Floors
Date 10/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pena, Daniel <hr/> Contributor address; City; State; Zip Code 113 Bethpage Drive Hutto, TX 78634	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) Rasa Floors
Date 09/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Revis, Russell <hr/> Contributor address; City; State; Zip Code 2810 Sandpebble Court Seabrook, TX 77586	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Sales Director		Employer (See Instructions) Behr

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 8/8
2 FILER NAME Austin Apartment Association		3 Filer ID (Ethics Commission Filers) 00090447
4 Date 10/18/2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roland, Bill <hr/> 6 Contributor address; City; State; Zip Code 808 W 10th Street Austin, TX 78701	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) emp		9 Employer (See Instructions) Granite Properties of Texas
Date 10/03/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surita, Roger <hr/> Contributor address; City; State; Zip Code 1602 lloydminister way Cedar Park, TX 78613	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Emp		Employer (See Instructions) Spot be Gone