

# 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: 6	
3 COMMITTEE NAME Austin Apartment Association				<b>OFFICE USE ONLY</b>  Date Received ELECTRONICALLY FILED 10/05/2023  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 checked="" 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 type="checkbox"/> December 5				
11 PERIOD COVERED	Month    Day    Year                      THROUGH                      Month    Day    Year 08/26/2023                      09/25/2023				

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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
<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 checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 423.00
EXPENDITURE TOTALS	<b>3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 0.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 122,285.70
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 style="text-align: right;">Emily Blair _____ 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 6

<b>17 COMMITTEE NAME</b> Austin Apartment Association		<b>18 Filer ID</b> 00090447	(Ethics Commission Filers)
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	423.00
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 checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	0.00
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: 1/1 Rpt: 4/6
<b>2</b> FILER NAME Austin Apartment Association		<b>3</b> Filer ID (Ethics Commission Filers) 00090447
<b>4</b> Date 09/20/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guggenbickler, Toni <hr/> <b>6</b> Contributor address; City; State; Zip Code 5900 CR 202  Lampasas, TX 76550	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Community Manager		<b>9</b> Employer (See Instructions)
Date 08/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Meagan <hr/> Contributor address; City; State; Zip Code 2528 Rifleman Cove  Leander, TX 78641	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Avenue5 Residential
Date 09/21/2023	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 (\$)  \$99.00
Principal occupation / Job title (See Instructions) VP of Sales		Employer (See Instructions) WeDoTrash
Date 08/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naylor, Stephanie <hr/> Contributor address; City; State; Zip Code 9100 Cessna Lane  Austin, TX 78717	Amount of Contribution (\$)  \$99.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Flooring Warehouse
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, James <hr/> Contributor address; City; State; Zip Code 3310 A Doolin Drive  Austin, TX 78704	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Joplin Properties

# PLEDGED CONTRIBUTIONS

## SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:

Sch: 1/1 Rpt: 5/6

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#: \_\_\_\_\_)

8 Amount of  
pledge (\$)

9 In-kind description  
(If applicable)

7 Pledgor Address; City; State; Zip Code

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

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

# LOANS

## SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 6/6
<b>2</b> FILER NAME Austin Apartment Association		<b>3</b> Filer ID (Ethics Commission Filers) 00090447
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b> 0.00
<b>5</b> Date of loan	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	<b>9</b> Loan Amount (\$)
<b>6</b> Is lender a financial institution?	<b>8</b> Lender address; City; State; Zip Code	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)