

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00091446	2 Total pages filed: 11	
3 COMMITTEE NAME Better Austin PAC			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/27/2026 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1609 S. 1st Austin, TX 78704			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Melissa NICKNAME LAST SUFFIX Chapman			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3509 Werner Avenue Austin, TX 78722			
7 CAMPAIGN TREASURER MAILING ADDRESS ☐ Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE TX			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (503) 701-3422			
9 REPORT TYPE	☐ January 15 ☐ 30th day before election ☐ Dissolution (Attach PAC-DR) ☐ July 15 ☒ 8th day before election ☐ 10th day after campaign treasurer termination ☐ Runoff			
10 PERIOD COVERED	Month Day Year 09/29/2026 THROUGH Month Day Year 10/24/2026			
11 ELECTION	ELECTION DATE Month Day Year 11/03/2026		ELECTION TYPE ☐ Primary ☐ Runoff ☐ Other ☒ General ☐ Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Better Austin PAC		13 Filer ID (Ethics Commission Filers) 00091446
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 Ryan Alter Council Member, District 5
		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) ☐ check here if this report qualifies for the higher itemization threshold
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 140,600.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 110,110.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 30,490.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT
<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;">Melissa Chapman _____ 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>

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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12 COMMITTEE NAME Better Austin PAC		13 Filer ID (Ethics Commission Filers) 00091446
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 Jose Velasquez Council Member, District 3
		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 Zo Qadri Council Member, District 9
		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 - GPAC**FORM GPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Better Austin PAC		18 Filer ID (Ethics Commission Filers) 00091446
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 140,600.00
2.	☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	☒ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	☐ SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	☐ SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	☐ SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	☐ SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	☐ SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	☒ SCHEDULE E: LOANS	\$ 0.00
10.	☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 110,110.00
11.	☒ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	☐ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	☒ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	☐ 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: 1/2 Rpt: 5/11
2 FILER NAME Better Austin PAC		3 Filer ID (Ethics Commission Filers) 00091446
4 Date 10/16/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Austin Hotel-Motel Association <hr/> 6 Contributor address; City; State; Zip Code 500 E. 4th St. Austin, TX 78701	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/02/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Garcia, Emmanuel <hr/> Contributor address; City; State; Zip Code 1609 S. 1st Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Principal/Shareholder		Employer (See Instructions) Seeker Strategies
Date 10/15/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Moonesinghe, Jimol <hr/> Contributor address; City; State; Zip Code 600 Guadalupe St., Apt. 6306 Austin, TX 78701	Amount of Contribution (\$) \$26,000.00
Principal occupation / Job title (See Instructions) Head of Executive Office at inKind		Employer (See Instructions) inKind
Date 10/15/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Moonesinghe, Johann <hr/> Contributor address; City; State; Zip Code 600 Guadalupe St., Apt. 6306 Austin, TX 78701	Amount of Contribution (\$) \$35,000.00
Principal occupation / Job title (See Instructions) CEO/Co-Founder at inKind		Employer (See Instructions) inKind
Date 10/16/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Moonesinghe, Kavan <hr/> Contributor address; City; State; Zip Code 600 Guadalupe St., Apt. 6306 Austin, TX 78701	Amount of Contribution (\$) \$26,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 6/11
2 FILER NAME Better Austin PAC		3 Filer ID (Ethics Commission Filers) 00091446
4 Date 10/15/2026	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Moonesinghe, Mark <hr/> 6 Contributor address; City; State; Zip Code 600 Guadalupe St., Apt. 6306 Austin, TX 78701	7 Amount of Contribution (\$) \$26,000.00
8 Principal occupation / Job title (See Instructions) Director of Restaurant Affairs at inKind		9 Employer (See Instructions) inKind
Date 10/16/2026	Full name of contributor ☐ out-of-state PAC (ID#: _____) Moonesinghe, Ruth <hr/> Contributor address; City; State; Zip Code 600 Guadalupe St., Apt. 6306 Austin, TX 78701	Amount of Contribution (\$) \$26,000.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 7/11

2 FILER NAME
Better Austin PAC

3 Filer ID (Ethics Commission Filers)
00091446

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 8/11
2 FILER NAME Better Austin PAC		3 Filer ID (Ethics Commission Filers) 00091446
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender ☐ out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral ☐ None	15 Check if personal funds were deposited into political account (See Instructions) ☐	
16 GUARANTOR INFORMATION ☐ not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 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: 1/3 Rpt: 9/11	2 FILER NAME Better Austin PAC	3 Filer ID (Ethics Commission Filers) 00091446
4 Date 10/15/2026	5 Payee name International Bank of Commerce	
6 Amount (\$) \$12.50 ☐ Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1200 San Bernardo Ave. Laredo, TX 78040	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Wire Transfer fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/15/2026	Candidate/Officeholder name Office sought Office held	
Payee name International Bank of Commerce		
Amount (\$) \$12.50 ☐ Expenditure from corporate funds	Payee address; City; State; Zip Code 1200 San Bernardo Ave. Laredo, TX 78040	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Wire Transfer fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/15/2026	Candidate/Officeholder name Office sought Office held	
Payee name International Bank of Commerce		
Amount (\$) \$12.50 ☐ Expenditure from corporate funds	Payee address; City; State; Zip Code 1200 San Bernardo Ave. Laredo, TX 78040	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Wire Transfer fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/15/2026	Candidate/Officeholder name Office sought Office held	
Payee name International Bank of Commerce		
Amount (\$) \$12.50 ☐ Expenditure from corporate funds	Payee address; City; State; Zip Code 1200 San Bernardo Ave. Laredo, TX 78040	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Wire Transfer fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 2/3 Rpt: 10/11	2 FILER NAME Better Austin PAC	3 Filer ID (Ethics Commission Filers) 00091446
4 Date 10/16/2026	5 Payee name International Bank of Commerce	
6 Amount (\$) \$12.50 ☐ Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1200 San Bernardo Ave. Laredo, TX 78040	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Wire Transfer Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/16/2026	Candidate/Officeholder name Office sought Office held	
Payee name International Bank of Commerce		
Amount (\$) \$12.50 ☐ Expenditure from corporate funds	Payee address; City; State; Zip Code 1200 San Bernardo Ave. Laredo, TX 78040	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Wire Transfer fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/19/2026	Candidate/Officeholder name Office sought Office held	
Payee name International Bank of Commerce		
Amount (\$) \$12.50 ☐ Expenditure from corporate funds	Payee address; City; State; Zip Code 1200 San Bernardo Ave. Laredo, TX 78040	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Wire Transfer fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 3/3 Rpt: 11/11	2 FILER NAME Better Austin PAC	3 Filer ID (Ethics Commission Filers) 00091446
4 Date 10/21/2026	5 Payee name Technicolor Campaigns	
6 Amount (\$) \$110,000.00 ☐ Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1633 Fitzwater St. Philadelphia, PA 19146-2039	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Digital Media campaign consulting and purchase of digital media distribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/21/2026	Payee name Technicolor Campaigns	
Amount (\$) \$35.00 ☐ Expenditure from corporate funds	Payee address; City; State; Zip Code 1633 Fitzwater St. Philadelphia, PA 19146-2039	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense Wire Transfer fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held