Texas Ethics Commission

Austin, Texas 78711-2070

(512)463-5800 TDD 1-800-735-2989

	JRPOSE COMMITTEE INANCE REPORT		FORM GPAC COVER SHEET PG 1
The GPAC Instruction Guide explains how to complete this form. 1 ACCOUNT # (Ethics Commission filers) 00015509			2 PAGE # 1 of 5
3 COMMITTEE NAME			OFFICE USEONLY 2
Home Builders Ass	sociation of Greater Austin Home PAC	Corporate	Date Received DEC 8
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; C 8140 Exchange Drive Austin, TX 78754	CITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarke
Change of Address			
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Mr. Harry	MI	Receipt # Amount
	NICKNAME LAST	SUFFIX	Date Processed
	Savio		Date Imaged
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)	Austin, TX 78754		ZIP CODE
7 CAMPAIGN TREASURER'S MAILING ADDRESS		SUITE#; CITY; ST	ATE; ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 454-5588	EXTENSION 111	
9 REPORT TYPE	January 15 30th day before elect X 8th day before elect July 15 Runoff		 Dissolution (attach PAC-DR) 10th day after campaign treasurer termination
10 PERIOD COVERED	Month Day Year THRC 10/26/2014	Month Day DUGH 12/08	
11 ELECTION	ELECTION DATE ELECTION TO Month Day Year 12/08/2014 Prima		General Special
GO TO PAGE 2			
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		URPOSE CO ND TOTALS	DMMITTEE REPORT:		ORM GPAC Sheet pg 2
12	COMMITTEE Hon NAME	ne Builders Associal	tion of Greater Austin Home PAC Corporate	ACCOUI 000155	
13	COMMITTEE	1. Candidates	A. Supported		
ACTIVITY (Attach lists on	ACTIVITY	(identify by name			
		or, if applicable, classify by party)	B. Opposed		
	plain paper to complete this	2. Measures	A. Supported		
	report if necessary.)	(describe by date and location of election and nature of issue)	B. Opposed		
	,	3. Officeholders Assisted			
		(identify by name or, if applicable, classify by party)			
14 CONTRIBUTION TOTALS		PLEDGES, LC (OR \$100 OR	ICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN JANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED LESS IF QUALIFIED FOR HIGHER THRESHOLD) Nere if this report qualifies for the higher itemization threshol	\$	785.00
			TICAL CONTRIBUTIONS		
			NPLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	15,785.00
EXPENDITURE TOTALS		3. TOTAL POLIT	ICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
		4. TOTAL POL	ITICAL EXPENDITURES	\$	19,434.91
	CONTRIBUTION BALANCE		ICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY ORTING PERIOD	\$	73,281.64
	OUTSTANDING LOAN TOTALS		IPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE THE REPORTING PERIOD	\$	0.00
15	AFFIDAVIT		I swear, or affirm, under penalty of period penalty of period report is true and correct and includes reported by me under Title 15, Election	all information re	
AFI	FIX NOTARY STAMP / SE/	AL ABOVE	Signature of Camp	aign Treasurer	
Sw	orn to and subscribe	d before me, by the sa	aid	, this the	day
			which, witness my hand and seal of office.		
S	ignature of officer admi	nistering oath	Printed name of officer administering oath Title	of officer administe	ring oath

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

			·
The Instruction Guide explains how to complete this form.			1 PAGE # Schedule: 1/1 Report: 3/5
2	FILER NAME	Home Builders Association of Greater Austin Home PA	C Corporate 3 ACCOUNT # (Ethics Commission filers) 00015509
4	Date	5 Full name of contributor D out-of-state PAC (ID# Austin Fire Fighters Association) 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)
	12/02/2014	6 Contributor address; City; State; Zip Code 7537 Cameron Road	\$15,000.00
		Austin, TX 78752-2013	(If travel outside of Texas, complete Schedule T)
9	Principal occup Politcal Actiio		nployer (See Instructions) ustin Firefighters Association
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0 Austin, Texas 78711-2070

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POLITIC			SCHEDULE F
	EXPENDITURE CATEG	ORIES	
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/C ing Legal Services Solicitation/Fundra	contract Labor Loan Repayme aising Expense Transportation Contributions/I trict Candidate/C Rental Expense OTHER (enter	Int/Reimbursement Equipment & Related Expense Jonations Made By Ifficeholder/Political Committee a category not listed above)
1 PAGE # Schedule: 1/2 Re	2 FILER NAME Home Builders Association of Greate	er Austin Home PAC	3 ACCOUNT # (TEC filers) 00015509
4 Date 12/08/2014	5 Payee name Bludworth, Naomi		
6 Amount (\$) \$630.00 Expenditure from corporate funds	7 Payee address City; State; Zip Code 1309 W. Lakeland Drive Austin, TX 78765		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside Print Design	of Texas, complete Schedule T)
		Check if Austin, TX, officehold	r living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 11/20/2014	Payee name Mike Levigne Public Relations		
Amount (\$)	Payee address City; State; Zip Code		· · · · ·
\$3,500.00	1514 Rich Creek Rd		
Expenditure from corporate funds	Austin, TX 78757		· · · ·
PURPOSE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside PAC Board Consulting Se	of Texas, complete Schedule T)
EXPENDITURE		Check if Austin, TX, officehold	or living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		· • • • •
12/01/2014	Mike Levigne Public Relations		
Amount (\$)	Payee address City; State; Zip Code		
\$3,500.00 Expenditure from corporate funds	1514 Rich Creek Rd Austin, TX 78757	· · · ·	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside PAC Board Consulting Se	of Texas, complete Schedule T)
LAFENDITORE	· · · ·	Check if Austin, TX, officehold	ar living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name	····· · · · · · · · · · · · · · · · ·	
12/01/2014	United States Postal Service	<u>\</u>	
Amount (\$)	Payee address City; State; Zip Code		
\$2,665.70	7700 Northcross Drive Austin, TX 78757		
PURPOSE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside District 10 Direct Mail	of Texas, complete Schedule T)
EXPENDITURE		Check if Austin, TX, officehold	a living overse
Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH	Sheri, Gallo	City Council District 10	

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POLITIC	AL EXPENDITURES	SCHEDULE F	
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundra	Intract Labor Loan Repayment/Reimbursement ising Expense Transportation Equipment & Related Expense contributions/Donations Made By Contributions/Donations Made By ict Candidate/Officeholder/Political Committee ental Expense OTHER (enter a category not listed above)	
1 PAGE# Schedule: 2/2 Re	2 FILER NAME Home Builders Association of Greate	r Austin Home PAC 3 ACCOUNT # (TEC filers 00015509	s)
4 Date	5 Payee name		
12/02/2014 6 Amount (\$)	United States Postal Service 7 Payee address City, State, Zip Code		
\$6,506.47 Expenditure from corporate funds	7700 Northcross Drive Austin, TX 78757		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) City-wide Issues Expense	
		Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:	
Date	Payee name		_
12/03/2014	United States Postal Service		
Amount (\$)	Payee address City: State: Zip Code		
\$1,887.57 Expenditure from corporate funds	7700 Northcross Drive Austin, TX 78757		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) [Troxclair General	
		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Troxclair, Ellen	Office sought: Office held: City Council District 8	
Date	Payee name		
12/08/2014	United States Postal Service	A	
Amount (\$)	Payee address City; State; Zip Code		
\$745.17 Expenditure from corporate funds	7700 Northcross Drive Austin, TX 78757		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) [Troxclair Position Comparison Piece	コ
EXPENDITURE		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Troxclair, Ellen	Office sought: Office held: City Council District 8	
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