The MPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00016265 3 COMMITTEE NAME Austin Apartment Association Political Action Committee 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 8620 Burnet Road Suite 475	2 Total pages filed: 6 OFFICE USE CALLY Date Received ELECTRONICALLY FILED 06/02/2016 Date Hand-delivered or Date Postmarked Receipt # Amount 2
Austin Apartment Association Political Action Committee 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 8620 Burnet Road Suite 475	Date Received ELECTRONICALLY FLED 06/02/2016 RECEIVED OATER Amount A
4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 8620 Burnet Road Suite 475	ELECTRONICALLY FILED 06/02/2016 RECEIVED Date Hand-delivered or Date Postmarked Receipt # Amount 22
ADDRESS 8620 Burnet Road Suite 475	Date Hand-delivered or Date Postmarked Receipt # Amour 2
	Date Hand-delivered or Date Postmarked Receipt # Amount
Change of Address Austin, TX 78757	Receipt # Amount
5 CAMPAIGN MS / MRS / MR FIRST MI TREASURER NAME MS. Kristan	Nate Processed
NICKNAME LAST SUFFIX	Date / resessed
. Arrona	Date Imaged
6 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STA TREASURER STREET ADDRESS (Residence or Business) Austin, TX 78757	ATE; ZIP CODE
	ATE; ZIP CODE
8 CAMPAIGN AREA CODE PHONE NUMBER EXTENSION TREASURER PHONE (512) 323-0990	
9 REPORT TYPE X Monthly 10th day after campaign treasurer termination	Dissolution (Attach PAC-DR)
10 MONTHLY REPORT FILING DEADLINE January 5 April 5 July 5 February 5 May 5 August 5 March 5 X June 5 September 5	October 5 November 5 December 5
11 PERIOD Month Day Year THROUGH Month 04/26/2016 . † THROUGH 05/25/2	Day Year 016
GO TO PAGE 2 Forms provided by Texas Ethics Commission www.ethics.state.tx.us	Version V1.0.178

FORM MPAC MONTHLY FILING GPAC REPORT: **PURPOSE AND TOTALS COVER SHEET PG 2** 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) Austin Apartment Association Political Action Committee 00016265 14 COMMITTEE 1. Candidates A. Supported ACTIVITY (Identify by name or, if applicable, classify by party.) (Attach lists on plain B. Opposed paper to complete this report if necessary.) A. Supported Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Ms. Sheri Gallo Assisted (Identify by name or, if applicable, classify by party.) 15 CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 0.00 **TOTALS** check here if this report qualifies for the higher itemization threshold 2. TOTAL POLITICAL CONTRIBUTIONS \$ 100.00 (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED **EXPENDITURE** 0.00 **TOTALS** 4. TOTAL POLITICAL EXPENDITURES \$ 1,050.00 TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY CONTRIBUTION 105,467.61 BALANCE OF THE REPORTING PERIOD TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE OUTSTANDING \$ 0.00 LOAN TOTALS LAST DAY OF THE REPORTING PERIOD 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. Kristan Arrona Signature of Campaign Treasurer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said day , to certify which, witness my hand and seal of office. Notary Public

Signature of officer administering oath

Title of officer administering oath

FORM MPAC MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 3 of 6 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) Austin Apartment Association Political Action Committee 00016265 14 COMMITTEE 1. Candidates A. Supported **ACTIVITY** (Identify by name or, if applicable, classify by party.) (Attach lists on plain B. Opposed paper to complete this report if necessary.) 2. Measures A. Supported (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Mr. Gerald Daugherty Assisted (Identify by name or, if applicable, classify by party. COMMITTEE 1. Candidates A. Supported Ms. Gina Hinojosa None **ACTIVITY** (identify by name or, if applicable, classify by party (Attach lists on plain B. Opposed paper to complete this report if necessary.) 2. Measures A. Supported (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

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

			4 of 6				
17 COMMITT	EE NAME artment Association Political Action Committee	18 Filer ID 00016265	(Ethics Commission Filers)				
19 SCHEDULE SUBTOTALS							
NAME OF	SUBTOTAL AMOUNT						
1. X	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS						
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$					
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$					
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	\$					
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION						
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$				
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	₹	\$				
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION						
9.	9. SCHEDULE E: LOANS						
10. X	\$ 1,050.00						
11.	\$						
12.	\$						
13.	\$						
14.	\$						
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$				
	ı						

MONET	TARY POLITICAL CONTRIBUTION	SCHEDULE A1	
The Instru	ction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/6	
2 FILER NAME Austin Apart	tment Association Political Action Committee	3 Filer ID (Ethics Commission Filers) 00016265	
4 Date 05/17/2016	5 Full name of contributor out-of-state PAC (ID#:_ Robinson, Robbie (Ms.) 6 Contributor address; City; State; Zip Code 1913 Cross Draw	7 Amount of Contribution (\$) \$100.0	
	Leander, TX 78641		
8 Principal occu Property Suj	upation / Job title (See Instructions)	9 Employer (See Instructions IMT Residential	s)

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract The Instruction Guide explains how to complete this			e /Contract Labor		Travel in District Travel Out of Di OTHER (enter a			
1 Total pages Schedule F1:	2 FILER NAM	 ИЕ					3	Filer ID	(Ethics Commissi	ion Filers)
Sch: 1/1 Rpt: 6/6		artment Associatio	n Political	Action C	omi	mittee		00016265		-
4 Date	5 Payee nam					······································	ــــــــــــــــــــــــــــــــــــــ	····		
04/29/2016	Daugherty									
6 Amount (\$)	7 Payee add	ress; City;	State;	; Zip Ca	de					
\$250.00	PO Box 9	2588								
Expenditure from corporate funds	Austin, TX	< 78709								
8 PURPOSE OF EXPENDITURE	Contributi	(See Categories listed at th ons/Donations Ma e/Officeholder/Polit	de By		(b)	<u></u>	ı, TX	, officeholder living		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Officeholder name	C	Office sou	ght			Office h	eld	
Date	Payee nam	ne		•						
05/25/2016	Gallo, She	eri (Ms.)								
Amount (\$)	Payee add	ress; City;	State	; Zip Co	de					
\$300.00	PO Box 2	6801								
Expenditure from corporate funds	Austin, TX	(78755								
PURPOSE	(a) Category	(See Categories listed at th	ne top of this sch	redule)	(b)	Description				
OF EXPENDITURE		ons/Donations Ma				<u> </u>		ide of Texas. Com , officeholder living	plete Schedule T.	
	Candidate	e/Officeholder/Polit	ucai Comm	iittee		General cam			•	
								9		
Complete <u>ONLY</u> if direct expenditure to benefit C/O		officeholder name	C	Office sou	ght			Office h	eld	
Date	Payee nam	ne								
04/29/2016	Hinojosa,	Gina (Ms.)								
Amount (\$) \$500.00	Payee addi	•	State;	; Zip Co	de					
Expenditure from corporate funds	Austin, TX	C 78703								
PURPOSE		(See Categories listed at th		iedule)	(b)	Description				
OF EXPENDITURE		ons/Donations Ma				□		ide of Texas. Com , officeholder living	plete Schedule T.	
	Candidate	e/Officeholder/Polit	licai Comm	ilitee		General cam				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		officeholder name	C	Office sou	ght			Office h	eld	

Paul Cauduro

From: Sent: do-not-reply@ethics.state.tx.us Thursday, June 02, 2016 8:16 AM

To:

Kristan Arrona

Cc:

Paul Cauduro: Paul Cauduro

Subject:

00016265 Texas Ethics Commissions Electronic Filing System Acknowledgment

Texas Campaign Finance Report Filing Acknowledgement for Austin Apartment Association Political Action Committee (Filer ID:00016265) submitted by Paul Cauduro. This is to acknowledge the receipt and acceptance of your electronic filing. Your filing for Austin Apartment Association Political Action Committee (Filer ID:00016265) was received and accepted by our system at Thu Jun 02 08:16:10 CDT 2016 and was assigned the report number of: TX-100634748. Please keep this acknowledgment, as it may be necessary to refer to it in the future.