

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) 00016265		2 Total pages filed: 10	
3 COMMITTEE NAME Austin Apartment Association Political Action Committee				OFFICE USE ONLY Date Received ELECTRONICALLY FILED 12/22/2016 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 Suite 475 Austin, TX 78757				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Kristan NICKNAME LAST SUFFIX Arrona				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 8620 Burnet Road, Suite 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				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 323-0990				
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 checked="" type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input 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 11/26/2016 THROUGH 12/25/2016				

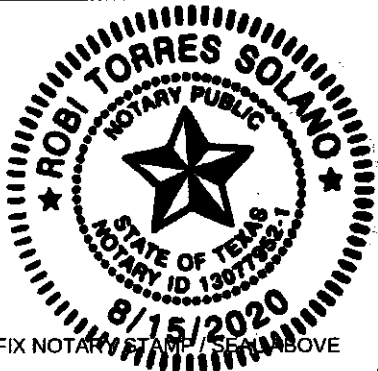
GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Austin Apartment Association Political Action Committee		13 Filer ID (Ethics Commission Filers) 00016265
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 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	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,497.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 10,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 117,464.12
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

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
Ms. Kristan Arrona

Signature of Campaign Treasurer

Sworn to and subscribed before me, by the said Kristan A. Arrona, this the 29th day of Dec, 20 16, to certify which, witness my hand and seal of office.

Robi Torres Solano
Signature of officer administering oath

Robi Torres Solano
Printed name of officer administering oath

Personal Banker
Title of officer administering oath

SUBTOTALS - MPAC**FORM MPAC**
COVER SHEET PG 3
3 of 10

17 COMMITTEE NAME Austin Apartment Association Political Action Committee		18 Filer ID (Ethics Commission Filers) 00016265
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,197.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 300.00
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 type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 10,000.00
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/10
2 FILER NAME Austin Apartment Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00016265
4 Date 12/14/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burleson, Nikki (Mrs.) 6 Contributor address; City; State; Zip Code 2212 Lookout Range Drive Leander, TX 78641	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Sales Rep		9 Employer (See Instructions) BG Staffing
Date 12/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Faulkner, Linssey Contributor address; City; State; Zip Code 6300 Bridge Pt Pkwy #300 Austin, TX 78730	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Greystar
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Christy Contributor address; City; State; Zip Code 809 S. Lamar Blvd. #476 Austin, TX 78704	Amount of Contribution (\$) \$99.00
Principal occupation / Job title (See Instructions) Regional Account Manager		Employer (See Instructions) Hire Priority Staffing
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matcha, Stephen (Mr.) Contributor address; City; State; Zip Code 1106 Cool Lake Cove Round Rock, TX 78665	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Merit Service Solutions
Date 11/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naylor, Stephanie (Ms.) Contributor address; City; State; Zip Code 9100 Cessna Lane Austin, TX 78717	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Carpet Warehouse

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/10
2 FILER NAME Austin Apartment Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00016265
4 Date 12/21/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborne, Lindsey (Ms.) <hr/> 6 Contributor address; City; State; Zip Code 6917 Leonardo Drive Round Rock, TX 78655	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Sales Representative		9 Employer (See Instructions) CORT
Date 12/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samaratunga, Anna (Ms.) <hr/> Contributor address; City; State; Zip Code 3700 Pipestone Rd Dallas, TX 75212	Amount of Contribution (\$) \$99.00
Principal occupation / Job title (See Instructions) Sales Representative		Employer (See Instructions) Impact Floors
Date 12/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seamans, Amanda <hr/> Contributor address; City; State; Zip Code 873 Picadilly Dr. Pflugerville, TX 78660	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Sales Associate		Employer (See Instructions) Lone Star Paving
Date 12/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vernon, Kelsea <hr/> Contributor address; City; State; Zip Code 1506 S IH 35 Apt. 1103 San Marcos, TX 78666	Amount of Contribution (\$) \$99.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Greystar

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 6/10	
2 FILER NAME Austin Apartment Association Political Action Committee		3 Filer ID (Ethics Commission Filers) 00016265	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 12/08/2016	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheri Gallo Campaign <hr/> 7 Contributor address; City; State; Zip Code P.O. Box 26801 Austin, TX 78755	8 Amount of contribution (\$) \$300.00	9 In-kind contribution description Meeting room expenses related to hosting campaign volunteers.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

PLEDGED CONTRIBUTIONS**SCHEDULE B****The Instruction Guide explains how to complete this form.****1** Total pages Schedule B:

Sch: 1/1 Rpt: 7/10

2 FILER NAME

Austin Apartment Association Political Action Committee

3 Filer ID (Ethics Commission Filers)

00016265

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date**6** Full name of pledgor ☐ out-of-state PAC (ID#: _____)**7** Pledgor Address; City; State; Zip Code**8** Amount of
pledge (\$)**9** In-kind description
(if applicable)☐ Check if travel outside of Texas. Complete Schedule T.**10** Principal occupation / Job title (See Instructions)**11** 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: 1/1 Rpt: 8/10	2 FILER NAME Austin Apartment Association Political Action Committee	3 Filer ID (Ethics Commission Filers) 00016265
4 Date 11/30/2016	5 Payee name Austin Firefighters Public Safety Fund	
6 Amount (\$) \$10,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 7537 Cameron Road Austin, TX 78752	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For expenses in the firefighter's effort to educate the public about the runoff election in Austin.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

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 F2: Sch: 1/1 Rpt: 9/10	2 FILER NAME Austin Apartment Association Political Action Committee	3 Filer ID (Ethics Commission Filers) 00016265
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 0.00
5 Date	6 Payee name	
7 Amount (\$)	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD**SCHEDULE F4****EXPENDITURE CATEGORIES FOR BOX 10(a)**Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political CommitteeEvent Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal ServicesLoan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract LaborSolicitation/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 F4: Sch: 1/1 Rpt: 10/10	2 FILER NAME Austin Apartment Association Political Action Committee	3 Filer ID (Ethics Commission Filers) 00016265
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0.00
5 Date	6 Payee name	
7 Amount (\$)	8 Payee address; City; State; Zip Code	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
	(a) Category (See Categories listed at the top of this schedule)	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held