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 00027574	5)	2 Total pages filed: 7
3 COMMITTEE NAME			OFFICE USE ONLY
The Real Estate C	ouncil of Austin, Inc. Good Government PAC		Date Received ELECTRONICALLY FILED 09/04/2018
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; Z 98 San Jacinto Blvd., Ste. 510	IP	OCC RECEIVED AT SEP 5'18 PM2:20
Change of Address	Austin, TX 78701		Date Hand-delivered or Date Postmarked
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Ms. Dianne	MI	Receipt # Amount
	NICKNAME LAST	SUFFIX	Date Processed
	Bangle		Date Imaged
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; 98 San Jacinto Blvd., Ste 50	CITY; STA	TE; ZIP CODE
	Austin, TX 78701	CITY: CT	ATE: 7ID CODE
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; APT / SUITE #; 98 San Jacinto Blvd., Ste 50	CITY; STA	ATE; ZIP CODE
Change of Addres	Austin, TX 78701		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTEN (512) 320-4151	SION	
9 REPORT TYPE	X Monthly 10th day after car treasurer termina		Dissolution (Attach PAC-DR)
10 MONTHLY REPORT FILING DEADLINE		July 5 August 5	October 5 November 5
			December 5
	March 5 June 5 X	September 5	
11 PERIOD COVERED	Month Day Year THROUGH 07/26/2018	Month 08/25/2	Day Year 018
	•		
	GO TO PAGE 2		

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME The Real Estate Council	of Austin, Inc. Good (Government		13 Filer 0002	27 5 74	(Ethics Commission Filers)
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	,			
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS,	OR GUARAN	CONTRIBUTIONS (OTHER THAN ITEES OF LOANS) c higher itemization threshold	·	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE)		BUTIONS S, OR GUARANTEES OF LOANS)		\$	5,516.90
EXPENDITURE TOTALS	3. TOTAL POLITICAL I	EXPENDITUR	IZED	\$	0.00	
	4. TOTAL POLITICA	L EXPENDI	TURES		\$	1,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN		ONS MAINTAINED AS OF THE LAST	DAY	\$	77,590.49
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL LAST DAY OF THE		ALL OUTSTANDING LOANS AS OF T PERIOD	ГНЕ	\$	0.00
16 AFFIDAVIT						
		•	I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.			
			Ms. Dian	ne Ran	nde	
			Signature of Cal			er
AFFIX NOTARY	STAMP / SEAL ABOVE					
Sworn to and subscribed	before me, by the said _		, tl	his the _		day
of	, 20, to certify	which, witness	s my hand and seal of office.			
Signature of officer add	ministering oath	Printed name	e of officer administering oath	Title	of office	er administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				JVER S	3 of 7
	MMITTI e Real	18 Filer ID 00027574	(Ethics Co	mmission Filers)	
	HEDUL ME OF	SUB.	TOTAL AMOUNT		
1.	х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	2,500.00	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$		
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	*
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	TION OR	\$	
6.	X	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$	2,271.12
7.	X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	745.78
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	1,000.00
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	·.	\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	·
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	
					•

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/7	
2	FILER NAME	tate Council of Austin, Inc. Good Government PAC	3 Filer ID (Ethics Commission Filers) 00027574	
4	Date 08/13/2018	5 Full name of contributor out-of-state PAC (ID#: Madere, Pamela		7 Amount of Contribution (\$) \$2,500.00
		6 Contributor address; City; State; Zip Code 4207 Bennedict Ln		
8	Principal occu	Austin, TX 78746 pation / Job title (See Instructions)	9 Employer (See Instructions)	<u> </u>
	Partner	patient to be the least medicate,	Jackson Walker LLP	

MONETARY SUPPORT FROM CORPORATION OR **LABOR ORGANIZATION**

SCHEDULE C3

	The Instru	ction Guide explains how to complete this form.	1	Total pages Sch: 1/1 Rp	Schedule C3: ot: 5/7
2	FILER NAME The Real Es	ate Council of Austin, Inc. Good Government PAC	3	Filer ID 00027574	(Ethics Commission Filers)
4	Date 07/31/2018	5 Corporation / Labor Organization name RECA	·		21.12
	Date 08/15/2018	Corporation / Labor Organization name RECA		Amount (\$)	2,250.00

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NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C4

	The Instru	cti	on Guide explains how to complete this form.	1	1 Total pages Schedule C4: Sch: 1/1 Rpt: 6/7		
2	FILER NAME The Real Es	tat	e Council of Austin, Inc. Good Government PAC	3	Filer ID 00027574	(Ethics Commission Filers)	
4	Date 07/30/2018	5	Corporation / Labor Organization name RECA	6	Amount (\$)	745	5.78

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Co	Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.			Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2	FILER NAME	:				3 Filer ID (Ethics Co	mmission Filers)
	Sch: 1/1 Rpt: 7/7		The Real Es	state Council	of Austin, Inc	. Good Gov	ernment	00027574	•
4	Date	5	Payee name						
	07/31/2018		Celia Israel					· · · · · · · · · · · · · · · · · · ·	
6	Amount (\$)	7	Payee addres		State	; Zip Code	•		
	\$1,000.00		PO Box 141	1246					
	Expenditure from corporate funds		Austin, TX 7	78714					
8	PURPOSE	(a)	Category (Se	ee Categories listed	at the top of this sc	nedute) (b)	Description		
	OF EXPENDITURE			ns/Donations			_	l outside of Texas. Complete Schedule	эT.
			Candidate/C	Officeholder/F	olitical Comn	nittee	_	n, TX, officeholder living expense to State Representative (Celia Israel for
								ampaign fundraiser	
9	Complete ONLY if direct		Candidate/Offi	ceholder name	;	Office sought		Office held	
	expenditure to benefit C/O	H							
								•	
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	•		•			•			