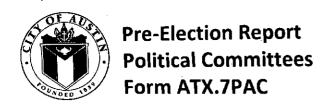


OCC RECEIVED AT. DEC 4'18 PM3:37

Use this form to report contributions received and expenditures made between the 9th day before the Election and the day before the Election that have met the monetary thresholds identified in City Code 2-2-29. For detailed instructions on how to complete this form, see the **Pre-Election Report: Political Committees Instruction Guide** 

1	Committee Name*			
COMMITTEE NAME	The Real Estate Council of Austin, Inc. Advancing Democracy PAC			
2	Address/ PO Box	Apartment or Suite Number		
COMMITTEE	98 San Jacinto Blvd.	Suite 510		
ADDRESS	City	State Zip Code		
	Austin	TX 78701		
3 COMMITTEE TREASURER NAME	Title First Name Susan	Middle Initial		
	Nickname Last Name Harris	Suffix		
_	Address/ PO Box	Apartment or Suite Number		
4	98 San Jacinto Bļvd.	Suite 510		
COMMITTEE TREASURER	City	State Zip Code		
ADDRESS	Austin	TX 78701		
5 REPORTING PERIOD	Start Date (yyyymmdd)*	End Date (yyyymmdd)*		
	20181203	THROUGH 20181204		

<sup>\*</sup> Indicates a required field



6		
SCHEDULES		Schedule ATX.7A - Pre-Election Report of Contributions
ATTACHED		
Check box for each form	$\boxtimes$	Schedule ATX.7F - Pre-Election Report of Expenditures
attached		

#### **AFFIDAVIT**

By signature below, I certify that the Pre-Election Report filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-29 for the reporting period indicated.

Signature of Affiant

### **Contribution**



# **Pre-Election Report of Contributions: Schedule ATX.7A**

(Attach to Form ATX.7PAC Coversheet)

Itemize each contribution in Sections 1-3.
For additional contributions, click "Add Another Contribution Page" below.

\* Indicates a required field

CONTRIBUTOR  NAME  Contributor is an individual	Contributor Title Contributor First Name*  Organization Name or Contributor Last Name, as applicable*	Contributor Suffix	
2 CONTRIBUTOR	Contributor Address/ PO Box*	Contributor Apartment or Suite Number	
ADDRESS AND	Contributor City*	Contributor State* Contributor Zip Code*	
EMPLOYER	Contributor Employer	Contributor Occupation	
	Per City Code 2-2-29(d), employer and occupation are required	for individuals whose contribution is \$200 or more	
3 CONTRIBUTION	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*	
DETAILS	In-Kind Contribution Description, if applicable		

Add Another Contribution Page



**Expenditure** 

(Attach to Form ATX 7PAC Coversheet)

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

**Note:** To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures** 

不	Ind	icat	es a	req	uired	field

1				
PAYEE				
NAME	Organization Name or Payee Last Name, as applicable*	_		
Payee is an individual	Upstream Communications LP			
2	Payee Address/ PO Box*	Payee Apartment	or Suite Number	
PAYEE	811 Trinity St.	Unit A		
ADDRESS	Payee City*	Payee State*	Payee Zip Code*	
	Austin	тх	78701	
3	Category*	(\$) Expenditure A	(\$) Expenditure Amount*	
EXPENDITURE	Advertising Expense	\$2,250.00		
DETAILS	Description (If Category is "Other")	Expenditure Date*		
		20181203		



**Expenditure** 

(Attach to Form ATX.7PAC Coversheet)

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

**Note:** To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures** 

\* Indicates a required field

1 PAYEE				
NAME  Payee is an individual	Organization Name or Payee Last Name, as applicable*  Upstream Communications LP			
2	Payee Address/ PO 8ox*	Payee Apartment	or Suite Number	
PAYEE ADDRESS	811 Trinity St.	Unit A		
	Payee City*	Payee State*	Payee Zip Code*	
	Austin	TX	78701	
3	Category*	(\$) Expenditure A	mount*	
EXPENDITURE	Advertising Expense	\$2,250.00		
DETAILS	Description (If Category is "Other")	Expenditure Date*		
		20181203		



**Expenditure** 

(Attach to Form ATX.7PAC Coversheet)

Itemize each expenditure in Sections 1-3. For additional expenditures, click "Add Another Expenditure Page" below.

**Note:** To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures** 

\* Indicates a required field

1				
PAYEE				
NAME	Organization Name or Payee Last Name, as applicable*	•		
Payee is an individual	Upstream Communications LP			
2	Payee Address/ PO Box*	Payee Apartment	or Suite Number	
PAYEE	811 Trinity St.	Unit A		
ADDRESS	Payee City*	Payee State*	Payee Zip Code*	
	Austin	тх	78701	
3	Category*	(\$) Expenditure A	mount*	
EXPENDITURE	Advertising Expense	\$7,000.00		
DETAILS	Description (If Category is "Other")	Expenditure Date*		
		20181203		



**Expenditure** 

Itemize each expenditure in Sections 1-3.
For additional expenditures, click "Add Another Expenditure Page" below.

(Attach to Form ATX.7PAC Coversheet)

**Note:** To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures** 

\* Indicates a required field

1				_
PAYEE				
NAME	Organization Name or Payee Last Name, as applicable*			
Payee is an individual	Upstream Communications LP			
2	Payee Address/ PO Box*	Payee Apartment	or Suite Number	_
PAYEE	811 Trinity St.	Unit A		
ADDRESS	Payee City*	Payee State*	Payee Zip Code*	
	Austin	тх	78701	
3	Category*	(\$) Expenditure A	mount*	_
EXPENDITURE	Advertising Expense	\$7,000.00		
DETAILS	Description (If Category is "Other")	Expenditure Date	*	_
	·	20181203		