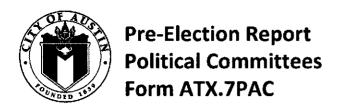


OCC RECEIVED AT DEC 5'18 AM10:49

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	Austin Police Association PAC							
2		Address/ PO Box				Apartment or Suite Number			
	COMMITTEE	5817 Wilcab Road City Austin							
	ADDRESS					Stat	e	Zip Code	
						TX	78721		
3	COMMUTTEE TREACURER	Title	First Name				м	iddle Initial	
	COMMITTEE TREASURER NAME	Mrs. Valencia							15
	NAME		Nickname Last Name			. Suffix			
		Val		Escobar				L	
_		Address/ PO Box				Apartment or Suite Number			
4	COLUMN TO TO THE TOTAL CASE OF	4103 Cisco Valley Drive							
	COMMITTEE TREASURER	City				State Zip Code			
	ADDRESS	Round Rock				TX		78664	
5	REPORTING PERIOD	Start Date (yyyymmdd)*					End Date (yyyymmdd)*		
_		20181203			THROUGH		20181210		

^{*} 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 Address/ PO Box*	Contributor Apartment or Suite Number				
CONTRIBUTOR						
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*				
AND						
EMPLOYER	Contributor Employer	Contributor Occupation				
	Per City Code 2-2-29(d), employer and occupation are required f	or individuals whose contribution is \$200 or more				
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*				
CONTRIBUTION						
DETAILS						
	In-Kind Contribution Description, if applicable					

Add Another Contribution Pege



Pre-Election Report of Expenditures: Schedule ATX.7F

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	Guardian Public Strategies				
2	Payee Address/ PO Box*	Payee Apartment or Suite Number			
PAYEE	815-A Brazos Street	Suite 304			
ADDRESS	Payee City*	Payee State*	Payee Zip Code*		
	Austin	TX	78701		
3	Category*	(\$) Expenditure A	mount*		
EXPENDITURE	Consulting Expense	\$5,000.00 Expenditure Date* 20181205			
DETAILS	Description (If Category is "Other")				

Add Another Expenditure Page