Office Use Only ☐

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 1: Cover Sheet

Use this form to:

1) Register as a lobbyist in accordance with City Code Section 4-8-5;
2) Amend or update registration information previously provided in accordance with City Code Section 4-8-5;
3) Terminate registration as a lobbyist per City Code Section 4-8-5;
4) Report lobbying activities engaged in during the preceding calendar quarter in accordance with Section 4-8-6 of the City Code; or
5) For entities electing to register and report as a business entity per City Code Section 4-8-4, this form must be filled out for each individual lobbyist employed by the entity.

For detailed instructions on how to complete this form, see the Lobbyist Reporting Form: Reporting Guide

This form must be submitted in its original digital format. Please do not print or scan this form.

FOR BEST RESULTS, PLEASE USE ADOBE READER OR ADOBE ACROBAT WHEN FILLING OUT THE FORM.

LOBBYIST NAME	Title: First Name*: JULIENNE Middle: Last Name*: CAIN Suffix: ☐ My employer is a 501c(3) non-profit organization
EMPLOYING ENTITY	☐ My employer is registered as a business entity, pays an entity registration fee, and is reporting on my behalf Entity/Organization Name*:
LOBBYIST PERMANENT BUSINESS STREET ADDRESS	Permanent Business Street Address*: 100 CONGRESS AVE Apartment or Suite Number: STE 1300 City*: AUSTIN State*: TX Zip Code*: 78701
LOBBYIST BUSINESS MAILING ADDRESS	Business Mailing Address*: 100 CONGRESS AVE Apartment or Suite Number: STE 1300 City*: AUSTIN State*: TX Zip Code*: 78701

* Indicates a required field

Lobbyist Reporting Form

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REPORT TYPE * *Check all that apply*	☐ I am registering as a new lobbyist ☐ I am renewing my annual lobbyist registration ☐ I am updating my current registration information of my most recent Quarterly Activity Report ☒ I am submitting my Quarterly Activity Report, including client compensation and expenditures, for the following activity reporting deadline: ☐ January ☒ April ☐ July ☐ October ☐ I am correcting the information provided on a previously filed report Previous Report Type: _____ Previous Report Date _____ ☐ I am terminating my Lobbyist Registration with the City of Austin and this report is my final activity report.

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Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

1) a specific description of each municipal question
2) an address or legal description of the real property, if real property is the subject of the municipal question
3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 70 PASCAL LANE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78746 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
- ☒ Taxation or Fees
- ☐ Technology or Communications
- ☒ Transportation or Mobility
- ☒ Zoning or Platting

Add Additional Municipal Question | Delete this page

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 721 CONGRESS AVE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78701 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
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- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 8509 FM 969 Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78724 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
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- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
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- ☒ Permits (Other)
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 4300 STAGGERBRUSH ROAD Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78749 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
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- ☐ Other:
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 710 WEST AVE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78701 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
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- ☐ Other:
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: COLTON BLUFF SPRINGS RD Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78744 Property Legal Description:

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- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☒ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 6500 RR 2222 Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78730 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
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- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 2300 CLOUD WAY Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78759 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
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- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
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- ☒ Permits (Other)
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: NW QUADRANT OF PEARCE LN & WOLF LN INT Suite or Apartment Number: City: CEDAR CREEK State: TX Zip Code: 78612 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: Suite or Apartment Number: City: State: Zip Code: Property Legal Description: MCCORMICK RANCH ON LAKE AUSTIN

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- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
- ☒ Taxation or Fees
- ☐ Technology or Communications
- ☒ Transportation or Mobility
- ☒ Zoning or Platting

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Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 8701 MOPAC EXPRESSWAY Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78759 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
- ☒ Taxation or Fees
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 308 GUADALUPE STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78701 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
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- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
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- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 1800 WESTLAKE PASS Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78746 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 5810 STEINER RANCH Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78732 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 7200 MOPAC EXPRESSWAY Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78731 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 6001 AIRPORT ROAD Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78752 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 6001 AIRPORT ROAD Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78704 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
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- ☒ Permits (Other)
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 304 E. CESAR CHAVEZ Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78701 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
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- ☒ Finance, Budget, or Investments
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- ☐ Hospitality, Tourism, Events, or Convention Center
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 1901 SAN ANTONIO STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78705 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
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- ☒ Economic Development
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- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
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- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: S. CONGRESS AND RALPH ABLENADO Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78701 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
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- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
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- ☒ Permits (Other)
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: NW CORNER OF SLAUGHTER AND IH-35 Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78745 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
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- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 5210 N LAMAR BLVD Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78751 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
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- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
- ☒ Taxation or Fees
- ☐ Technology or Communications
- ☒ Transportation or Mobility
- ☒ Zoning or Platting

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: E. STATE HWY 71 Suite or Apartment Number: City: DEL VALLE State: TX Zip Code: 78617 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: Suite or Apartment Number: City: State: Zip Code: Property Legal Description: LOT 1-2 BLK A ALEXAN MOUNTAIN VIEW & PT LOT 1 & LOT 2 BELVIN M E SUBD & ABS 86 SUR 75 BELL AF ACR 10.6010

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	DEVELOPMENT OF MAJOR LEAGUE SOCCER STADIUM AND RELATED PRACTICE FACILITIES
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: Suite or Apartment Number: City: State: Zip Code: Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☐ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☐ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 5521 SPRINGDALE ROAD Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78723 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO REZONING AND ANY RELATED SITE PERMITS
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 1109 S. PLEASANT VALLEY ROAD Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78741 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
- ☒ Taxation or Fees
- ☐ Technology or Communications
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 1600 WICKERSHAM LANE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78741 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 1225 S. PLEASANT VALLEY ROAD Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78741 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
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- ☒ Parks, Recreation, Libraries, or Museums
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 4700 E. RIVERSIDE DRIVE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78741 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
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- ☒ City Infrastructure or Public Works
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 1515 WICKERSHAM LANE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78741 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
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- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
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- ☒ Economic Development
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- ☐ Labor or Workforce
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- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
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- ☒ Permits (Other)
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 2033 E 5TH STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78702 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 501 NAVASOTA STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78702 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
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- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
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- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
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To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 502 ONION STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78702 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
- ☒ Taxation or Fees
- ☐ Technology or Communications
- ☒ Transportation or Mobility
- ☒ Zoning or Platting

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Delete this page

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 1402, 1406, AND 1410 E. 5TH STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78702 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 2511 W. BRAKER LANE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78758 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
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- ☐ Municipal Legislation
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- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
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- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 4400 MESA WOODS DRIVE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78759 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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- ☒ Real Estate
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: Suite or Apartment Number: City: State: Zip Code: Property Legal Description: LOT 1 VELOCITY TECHNOLOGY CENTER

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
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- ☒ Economic Development
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- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 1600 S. LAMAR Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78704 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 1438 YAGER LANE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78753 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
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- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 3702 BLUESTEIN DRIVE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78721 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
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- ☐ Technology or Communications
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 2552 GUADALUPE STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78705 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
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- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
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- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 109 E. 7TH STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78701 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
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- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 7016 RIBELEN RANCH DRIVE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78750 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
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- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 9505 STONELAKE BLVD. Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78759 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
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- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
- ☒ Taxation or Fees
- ☐ Technology or Communications
- ☒ Transportation or Mobility
- ☒ Zoning or Platting

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Delete this page

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 15218 AND 15230 N. FM 620 Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78717 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 3803 AVENUE B Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78751 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 501 BRAZOS STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78701 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 4701 RED BLUFF ROAD Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78702 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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- ☒ Real Estate
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	COMPLIANCE WITH VARIOUS CODE REQUIREMENTS
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 2400 S. CONGRESS AVENUE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78704 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
- ☒ Taxation or Fees
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 5101 E. OLTORF STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78741 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
- ☒ Taxation or Fees
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 5010 E. OLTORF STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78741 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 5208 E. OLTORF STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78741 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 2424 RIVERSIDE FARMS ROAD Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78741 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ZONING AND NEIGHBORHOOD PLAN AMENDMENT APPLICATIONS
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.

Address: 8105 BURNET ROAD

Suite or Apartment Number:

City: AUSTIN

State: TX

Zip Code: 78757

Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 12515 RESEARCH BLVD Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78759 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
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- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 6001 S. IH 35 SERVICE RD. NB Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78744 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
- ☒ Taxation or Fees
- ☐ Technology or Communications
- ☒ Transportation or Mobility
- ☒ Zoning or Platting

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Delete this page

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 7300 N. RR 620 Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78726 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 7300 N. RR 620 Suite or Apartment Number: City: State: Zip Code: 78758 Property Legal Description: LOT 1 BRAKER AT BURNET SECTION 4

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☐ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
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- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 6310 WILHELMINA DELCO DR. Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78752 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
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Subject Matter(s)*: Check all subject matters that apply to the municipal question above

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- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
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- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
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- ☐ Municipal Legislation
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- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 12600 MCCALLEN PASS Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78753 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 70 RAINEY STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78701 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
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- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 305 S. CONGRESS AVE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78704 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
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- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: Suite or Apartment Number: City: State: Zip Code: Property Legal Description: ABS 160 SUR 50 CASTRO M ACR 130.4580 (1-D-1)

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
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- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
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- ☐ Other:
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 1500 W 35TH STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78703 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 5505 PARADOX COVE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78731 Property Legal Description: PROPERTY OWNER

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
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- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 6936 AND 7016 E. BEN WHITE BLVD. Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78741 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	ENTITLEMENTS RELATED TO LAND DEVELOPMENT
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 9100 BROWN LANE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78754 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
- ☒ Taxation or Fees
- ☐ Technology or Communications
- ☒ Transportation or Mobility
- ☒ Zoning or Platting

Add Additional Municipal Question

Delete this page

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Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 2400 E. WILLIAM CANNON Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78744 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
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- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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- ☒ Real Estate
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 7309 S. IH-35 Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78745 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
- ☒ Taxation or Fees
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 2323 S. LAMAR Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78704 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 11902 BURNET ROAD Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78758 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 11921 MOPAC EXPRESSWAY Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78759 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 1122 E. 51st Street Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78723 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
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- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 4824 E. CESAR CHAVEZ Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78702 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
- ☒ Diversity, Equity, or Inclusion
- ☒ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
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- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 200 E. RIVERSIDE DRIVE Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78704 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
- ☐ Contracts or Procurement
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- ☒ Economic Development
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- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
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- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
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- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 411 AND 413 E. 30TH STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78705 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
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- ☒ Construction
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- ☒ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☒ Neighborhoods
- ☒ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 2906 DUVAL STREET Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78705 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☒ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☒ Code Compliance
- ☒ Construction
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- ☐ Municipal Legislation
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- ☒ Parks, Recreation, Libraries, or Museums
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PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: 9101 RESEARCH BLVD. Suite or Apartment Number: City: AUSTIN State: TX Zip Code: 78758 Property Legal Description:

Subject Matter(s)*: Check all subject matters that apply to the municipal question above

- ☐ Accessibility or Persons with Disabilities
- ☒ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
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- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☒ Real Estate
- ☒ Rules, Proposed Rules, or Rule Making
- ☒ Taxation or Fees
- ☐ Technology or Communications
- ☒ Transportation or Mobility
- ☒ Zoning or Platting

Add Additional Municipal Question

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: PACITTI Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 300 W. 6TH STREET Client Apartment or Suite Number: STE 2300 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: NELSEN PARTNERS, INC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 905 CONGRESS AVE Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: ; Client First Name*: ; Middle: ; Organization Name or Client Last Name, as applicable*: KIPP AUSTIN ; Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 8509 FM 696 ; Client Apartment or Suite Number: ; Client City*: AUSTIN ; Client State*: TX ; Client Zip Code*: 78724 ; Nature of Client's Business*: EDUCATION

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: GALLEGOS Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 5515 BALCONES DRIVE Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78731 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: ; Client First Name*: ; Middle: ; Organization Name or Client Last Name, as applicable*: CIRRUS LOGIC, INC ; Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 800 W. 6TH ; Client Apartment or Suite Number: ; Client City*: AUSTIN ; Client State*: TX ; Client Zip Code*: 78701 ; Nature of Client's Business*: TECHNOLOGY

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: CARMA TEXAS, INC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 11501 ALTERRA PKWY Client Apartment or Suite Number: STE 100 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78758 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: ENDEAVOR REAL ESTATE GROUP, LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 500 W. 5TH STREET Client Apartment or Suite Number: STE 700 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $10,000 - $24,999 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: ORACLE Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 9515 TOWNE CENTRE DR. Client Apartment or Suite Number: Client City*: SAN DIEGO Client State*: CA Client Zip Code*: 92121 Nature of Client's Business*: SOFTWARE APPLICATIONS

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $10,000 - $24,999 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: QUALICO CR, L.P. Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 1440 THE LAKES BLVD Client Apartment or Suite Number: Client City*: PFLUGERVILLE Client State*: TX Client Zip Code*: 78660 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: TAYLOR MORRISON OF TEXAS, INC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 11200 LAKELINE BLVD Client Apartment or Suite Number: STE 150 A Client City*: AUSTIN Client State*: TX Client Zip Code*: 78717 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: YETI COOLER, INC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 5301 SOUTHWEST PARKWAY Client Apartment or Suite Number: STE 200 Client City*: AUSTTN Client State*: TX Client Zip Code*: 78735 Nature of Client's Business*: RETAILER

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: EURUS 8701 ATRIUM LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 7200 N. MOPAC Client Apartment or Suite Number: STE 450 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78731 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: LINCOLN PROPERTY COMPANY Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 2000 MCKINNEY AVE Client Apartment or Suite Number: STE 100 Client City*: DALLAS Client State*: TX Client Zip Code*: 75201 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $10,000 - $24,999 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: MCHALE Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 111 CONGRESS AVE Client Apartment or Suite Number: STE 3000 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: MU 15 INVESTMENTS, LTD Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 7200 N. MOPAC Client Apartment or Suite Number: STE 450 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78731 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: THE KUCERA COMPANY Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 7200 N. MOPAC Client Apartment or Suite Number: STE 450 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78731 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: ; Client First Name*: ; Middle: ; Organization Name or Client Last Name, as applicable*: REDLEAF HIGHLAND, LLC ; Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 4015 GUADALUPE ST ; Client Apartment or Suite Number: ; Client City*: AUSTIN ; Client State*: TX ; Client Zip Code*: 78751 ; Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: ; Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. ; If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: STREAM REALTY Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 515 CONGRESS AVE Client Apartment or Suite Number: STE 1300 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $10,000 - $24,999 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: WHITE LODGING SERVICES CORPORATION Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 701 E. 83RD AVE Client Apartment or Suite Number: STE 17 Client City*: MERRILLVILLE Client State*: IN Client Zip Code*: 46410 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: BARSHOP & OLES COMPANY Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 801 CONGRESS AVE Client Apartment or Suite Number: STE 300 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: HEB GROCERY STORES Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 646 SOUTH MAIN Client Apartment or Suite Number: Client City*: SAN ANTONIO Client State*: TX Client Zip Code*: 78204 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: FASKEN OIL AND RANCH Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 3600 BEE CAVES ROAD Client Apartment or Suite Number: STE 200 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78746 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: HEB/ CHARES BUTT (HOLDSWORTH CENTER) Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 646 SOUTH MAIN Client Apartment or Suite Number: Client City*: SAN ANTONIO Client State*: TX Client Zip Code*: 78204 Nature of Client's Business*: EDUCATIONAL CENTER

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: 183 BLW, LP Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: P.O. BOX 9190 Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78766 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: 2501 W. BRAKER, L.P. Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 1601 MOPAC EXPRESSWAY Client Apartment or Suite Number: STE 175 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78746 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: ; Client First Name*: ; Middle: ; Organization Name or Client Last Name, as applicable*: AUSTIN ACHIEVE SCHOOLS ; Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 5908 MANOR ROAD ; Client Apartment or Suite Number: ; Client City*: AUSTIN ; Client State*: TX ; Client Zip Code*: 78723 ; Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: ; Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. ; If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: ; Client First Name*: ; Middle: ; Organization Name or Client Last Name, as applicable*: AUSTIN BAPTIST CHURCH ; Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 823 CONGRESS AVE ; Client Apartment or Suite Number: STE 111 ; Client City*: AUSTIN ; Client State*: TX ; Client Zip Code*: 78701 ; Nature of Client's Business*: RELIGIOUS ASSEMBLY

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: ; Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. ; If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: BLENHEIM CORPORATION Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 4716 ST. JOHN'S DR Client Apartment or Suite Number: Client City*: DALLAS Client State*: TX Client Zip Code*: 75205 Nature of Client's Business*: RESIDENTIAL REAL ESTATE ORGANIZATION

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: BROCK CONSULTING GROUP Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: P.O. BOX 160340 Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78716 Nature of Client's Business*: RESIDENTIAL REAL ESTATE ORGANIZATION

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: CAPRIDGE PARTNERS, LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 823 CONGRESS AVE Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: ; Client First Name*: ; Middle: ; Organization Name or Client Last Name, as applicable*: CWS CAPITAL PARTNERS, LLC ; Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 9606 N. MOPAC EXPRESSWAY ; Client Apartment or Suite Number: STE 500 ; Client City*: AUSTIN ; Client State*: TX ; Client Zip Code*: 78759 ; Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: ; Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. ; If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: ; Client First Name*: ; Middle: ; Organization Name or Client Last Name, as applicable*: DOWNTOWN AUSTIN ALLIANCE ; Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 211 E. 7TH STREET ; Client Apartment or Suite Number: STE 818 ; Client City*: AUSTIN ; Client State*: TX ; Client Zip Code*: 78701 ; Nature of Client's Business*: ADVOCACY ORGANIZATION

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: ; Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. ; If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: GABLES RESIDENTIAL Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 6850 AUSTIN CENTER BLVD. Client Apartment or Suite Number: STE 200 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78731 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: HELPING HAND HOME FOR CHILDREN Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 3804 AVENUE B Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78751 Nature of Client's Business*: NON-PROFIT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: HPI REAL ESTATE & SERVICES INVESTMENT Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 3600 N. CAPITAL OF TEXAS HWY Client Apartment or Suite Number: BLDG B, STE 250 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78746 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: MAGELLAN DEVELOPMENT GROUP, LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 225 N. COLUMBUS DRIVE Client Apartment or Suite Number: STE 100 Client City*: CHICAGO Client State*: IL Client Zip Code*: 60601 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: MEREDITH FAMILY REVOCABLE TRUST Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 248 ADDIE ROY RD Client Apartment or Suite Number: STE C200 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78746 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: PARKE PROPERTIES I, L.P Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 1411 SLEDGE DRIVE Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78734 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $10,000 - $24,999 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: REDDEHASE Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 715 GOLF CREST LN Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78734 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: ROBINSON RANCH Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: PO BOX 9556 Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78766 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: RYAN STREET & ASSOCIATES Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 2414 EXPOSITION BLVD Client Apartment or Suite Number: STE B-140 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78703 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: THE UNIVERSITY OF TEXAS SYSTEM Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 201 WEST 7TH STREET Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: HIGHER EDUCATION

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $10,000 - $24,999 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: TRAMMELL CROW Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 100 CONGRESS AVE Client Apartment or Suite Number: STE 225 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: TRAVIS HOTEL GROUP, LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 2711 N HASKELL AVE Client Apartment or Suite Number: STE 2800 Client City*: DALLAS Client State*: TX Client Zip Code*: 75204 Nature of Client's Business*: HOSPITALITY

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: TRUDY'S TEXAS STAR, INC. Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 8133 MESA DR. Client Apartment or Suite Number: #206 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78759 Nature of Client's Business*: RESTAURANTS

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: W&G PARTNERSHIP Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 2801 VIA FORTUNA Client Apartment or Suite Number: STE 525 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78746 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: ; Client First Name*: ; Middle: ; Organization Name or Client Last Name, as applicable*: HYDE PARK BAPTIST CHURCH ; Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 3901 SPEEDWAY ; Client Apartment or Suite Number: ; Client City*: AUSTIN ; Client State*: TX ; Client Zip Code*: 78751 ; Nature of Client's Business*: RELIGOUS ASSEMBLY

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: ; Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. ; If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: HI TECH AUTO GROUP Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 3800 SOUTHWEST FREEWAY Client Apartment or Suite Number: STE 300 Client City*: HOUSTON Client State*: TX Client Zip Code*: 77024 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: MANIFOLD REAL ESTATE Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: PO BOX 200463 Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78720 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: PRECOURT SPORTS VENTURES, LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 1 BLACK & GOLD BLVD Client Apartment or Suite Number: Client City*: COLUMBUS Client State*: OH Client Zip Code*: 43211 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $25,000 - $49,999 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: INTREPID EQUITY INVESTMENTS LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 8140 N. MOPAC Client Apartment or Suite Number: SUITE 4-145 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78759 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: NRE EDGE, LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 3100 MCKINNON STREET Client Apartment or Suite Number: STE 250 Client City*: DALLAS Client State*: TX Client Zip Code*: 75201 Nature of Client's Business*: PROPERTY OWNER

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: BP RIVERSIDE WEST, LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 3100 MCKINNON STREET Client Apartment or Suite Number: STE 250 Client City*: DALLAS Client State*: TX Client Zip Code*: 75201 Nature of Client's Business*: PROPERTY OWNER

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: ; Client First Name*: ; Middle: ; Organization Name or Client Last Name, as applicable*: NRE TOWN LAKE PROPERTY OWNER, LLC ; Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 1801 CENTURY PARK WEST ; Client Apartment or Suite Number: 5TH FLOOR ; Client City*: LOS ANGELES ; Client State*: CA ; Client Zip Code*: 90067 ; Nature of Client's Business*: PROPERTY OWNER

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: BALLPARK AUSTIN, LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 1801 CENTURY PARK WEST Client Apartment or Suite Number: 5TH FLOOR Client City*: LOS ANGELES Client State*: CA Client Zip Code*: 90067 Nature of Client's Business*: PROPERTY OWNER

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: NRE ZONE LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 3100 MCKINNON STREET Client Apartment or Suite Number: STE 250 Client City*: DALLAS Client State*: TX Client Zip Code*: 75201 Nature of Client's Business*: PROPERTY OWNER

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: RIVERSIDE RESOURCES Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 100 CONGRESS AVENUE Client Apartment or Suite Number: STE 1450 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: FIFTH & ONION 2016, LP Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 100 CONGRESS AVENUE Client Apartment or Suite Number: STE 1450 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: TMINE, INC. Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 9 W. 57TH STREET Client Apartment or Suite Number: Client City*: NEW YORK Client State*: NY Client Zip Code*: 10019 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $10,000 - $24,999 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: IDEA PUBLIC SCHOOLS Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 1822 W. BRAKER LANE Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78708 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: RED BLUFF PARTNERS, LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 11036 ARROYO CANYON DRIVE Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78736 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: ZIPS DRY CLEANERS Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 1803 S. LAMAR BLVD. Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78704 Nature of Client's Business*: RETAILER

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: SLATE REAL ESTATE PARTNERS Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 811 KATY FREEWAY I Client Apartment or Suite Number: STE 925 Client City*: HOUSTON Client State*: TX Client Zip Code*: 77024 Nature of Client's Business*: REAL ESTATE/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: KARLIN REAL ESTATE LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 500 W. 2ND STREET Client Apartment or Suite Number: STE 1400 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: REAL ESTATE/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: PAGE SOUTHERLAND PAGE, INC. Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 400 W. CESAR CHAVEZ ST. Client Apartment or Suite Number: STE 500 Client City*: AUSTIN Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: REAL ESTATE/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: CLARENDON COMPANY, LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: P.O. BOX 530255 Client Apartment or Suite Number: Client City*: ATLANTA Client State*: GA Client Zip Code*: 30353 Nature of Client's Business*: REAL ESTATE/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $25,000 - $49,999 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: ; Client First Name*: ; Middle: ; Organization Name or Client Last Name, as applicable*: RYAN COMPANIES, INC ; Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 100 CONGRESS AVE ; Client Apartment or Suite Number: STE 100 ; Client City*: AUSTIN ; Client State*: TX ; Client Zip Code*: 78701 ; Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: ; Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. ; If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: ; Client First Name*: ; Middle: ; Organization Name or Client Last Name, as applicable*: GREYSTAR ; Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 812 SAN ANTONIO ; Client Apartment or Suite Number: STE 600 ; Client City*: AUSTIN ; Client State*: TX ; Client Zip Code*: 78701 ; Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: THE FERBER COMPANY, INC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 151 SAWGRASS CORNERS DRIVE Client Apartment or Suite Number: STE 202 Client City*: POINTE VERDRA BEACH Client State*: FL Client Zip Code*: 32082 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: DAVID Middle: Organization Name or Client Last Name, as applicable*: BOOTH Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 4929 RANCH ROAD 2222 Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78731 Nature of Client's Business*: PROPERTY OWNER

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: CENTRAL MACHINE OPERATING COMPANY LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 4826 E. CESAR CHAVEZ Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78702 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: 200 E. RIVERSIDE, LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 4401 N. MESA ST. Client Apartment or Suite Number: Client City*: EL PASO Client State*: TX Client Zip Code*: 79902 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: FOCAL POINT DS TEXAS LLC Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 1920 MCKINNEY AVE. Client Apartment or Suite Number: 7th Floor Client City*: DALLAS Client State*: TX Client Zip Code*: 75201 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: less than $10,000 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: LDG DEVELOPMENT Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 1469 SOUTH 4TH ST. Client Apartment or Suite Number: Client City*: LOUISVILLE Client State*: KY Client Zip Code*: 40208 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 3: Client

Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period
CLIENT NAME	Client Title: Client First Name*: Middle: Organization Name or Client Last Name, as applicable*: PURE REAL ESTATE PARTNERS, LP Client Suffix:
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 5515 BALCONES DRIVE Client Apartment or Suite Number: Client City*: AUSTIN Client State*: TX Client Zip Code*: 78731 Nature of Client's Business*: REAL ESTATE INVESTMENT/ DEVELOPMENT

Section 3b: Client Compensation

Disclosure of compensation received for each client is required for Quarterly Activity and/or Termination of Registration Reports
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

CLIENT COMPENSATION	Compensation Category*: $0 (No Compensation Received) OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you selected "I Decline/Refuse to Report", provide your reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 4: Employee

For each person employed or retained by the individual lobbyist for the purpose of assisting in or preparing for lobbying (excluding purely clerical or administrative assistance), provide a separate page with the information below (City Code Section 4-8-5(B)(4)(c)). If the lobbyist has retained no employees, leave this page blank.

For additional employees, click "Add Another Employee Page" below.

NO EMPLOYEES TO REPORT	☐ I employed or retained no employees during the applicable reporting period
PERSON EMPLOYED OR RETAINED	Title First Name* Middle Last Name * Suffix Employer* Occupation*
BUSINESS ADDRESS	Business Address* Apartment or Suite Number City* State* Zip Code*
MAYOR/COUNCIL RELATIVE OR HOUSEHOLD MEMBER	☐ Is the person identified above related (within the third degree of consanguinity) to the Mayor or a Council Member, or a member of their household, as defined in City Code Section 4-8-6(A)(5)? If yes, describe the nature of their employment *required if the above box is checked First Name of Mayor/Council Member Last Name of Mayor/Council Member

* Indicates a required field

Add Another Employee Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Sections 5, 6 and 7 are for filing Quarterly Activity Reports or a Termination of Lobbyist Registration.

If you are not submitting this form during a quarterly activity reporting deadline or to terminate your lobbyist registration, proceed directly to Section 8: Declaration and Electronic Submission.

Section 5: Statement of No Activity

STATEMENT OF NO EXPENDITURES MADE AND NO COMPENSATION RECEIVED

Lobbyists who have no reportable activity for the reporting period must submit a Statement of No Activity to the Clerk's Office (City Code Section 4-8-6(D)).

By checking the No Activity Confirmation, I affirm that I have no reportable activity during this reporting period, as defined by the four conditions below.

- I received no Client Compensation during this activity period (§4-8-6(A)(2)).
- I made no Expenditures for lobbying during this activity period (§4-8-6(A)(3)).
- I have not exchanged money, goods, services, or anything of value totaling more than $500 with a business entity in which a City Official has a substantial economic interest during this reporting period (§4-8-6(A)(4)).
- I have no employees who are household members or related (within third degree of consanguinity or affinity) to the Mayor or a Council Member to report during this reporting period (§4-8-6(A)(5)).

No Activity Confirmation

☐ I have read the four conditions above and confirm that I have no reportable activity to disclose during this reporting period

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 6: Expenditure Totals

Provide the total amount of expenditures for lobbying, sub-totaled by the categories listed below. A blank value will be interpreted as $0 spent in that particular category (§4-8-6(A)(3)).

Cumulative expenditures of more than $50 by an individual lobbyist per day per City Official in the expense categories listed below must be itemized on an Expenditure page.

EXPENDITURE TOTALS (Blank values will be interpreted as $0)	($) Reimbursement to Others	
	($) Food and Beverages	
	($) Transportation and Lodging	
	($) Gifts (other than Awards and Mementos)	
	($) Entertainment	
	($) Awards and Mementos	
	($) Honorariums	
	($) Attendance of Council Members at Charitable Events or Fundraisers	
	($) Media Communications (broadcast, print, advertising, etc.)	
	($) Payments to persons who assist with Media Communications as defined in §4-8-6(A)(3)(j)	

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 7: Expenditure

For each itemized expenditure, provide a separate page with the information below. Cumulative expenditures of more than $50 per day per City Official in the expense categories provided below must be itemized on an Expenditure Page (§4-8-6(A)(3)).

Per §4-8-6(A)(4), exchanges of money, goods, services, or anything of value to a business or business interest of a City Official that total $500 or more during the reporting period must also be itemized on an Expenditure Page.

For additional expenditures, click "Add Another Expenditure Page" below.

PAYEE NAME AND BUSINESS INTEREST	Payee Title Payee First Name* Organization Name or Payee Last Name, as applicable* Payee Suffix ☐ This payee is a business or business interest of a City Official If yes, First Name of City Official Last Name of City Official Department of City Official Job Title of City Official
PAYEE ADDRESS	Payee Address/ PO Box* Payee Apartment or Suite Number Payee City* Payee State* Payee Zip Code*
EXPENDITURE DETAILS	($) Expenditure Amount* Expenditure Date* Category* Purpose of the Expenditure*

Identify each City Official who benefitted from or who may have been influenced by the expenditure, if applicable

City Official First Name	City Official Last Name	Department	Job Title

Add Another Expenditure Page

Delete this page

Lobbyist Reporting Form

Required for Lobbyist Registration, Termination, or Quarterly Activity Reporting

Section 8: Declaration and Electronic Submission

DECLARATION

By my signature below and subject to the penalty of perjury, I swear or affirm that the facts provided in this Lobbyist Reporting Form are true and correct to the best of my knowledge and belief and include all information required to be reported by me pursuant to City Code, Chapter 4-8.

I understand that pursuant to §4-8-9(E) of the Austin City Code, this report is made under oath regardless of whether there is any jurat or affidavit of verification, including a signature.

JULIENNE CAIN	4/10/2019
Typed Name	Report Date*

Electronic Submission and Signature

☒ I have completed a Lobbyist Contact Information Form, and my signature and e-mail address are both on file at the City Clerk's Office.

New or Renewing Lobbyist Registrations are not considered complete until the appropriate registration fee has been paid. If you are registering for the first time as a lobbyist or are renewing your annual registration, you must remit payment via cash, check, or money order.