FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00090447 3 COMMITTEE NAME **OFFICE USE ONLY Austin Apartment Association** Date Received **ELECTRONICALLY FILED** 08/04/2020 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 8620 Burnet Road #475 Change of Address Austin, TX 78757 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount **Emily** NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Blair CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 8620 Burnet Road STREET **ADDRESS** #475 (Residence or Business) Austin, TX 78757 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** MAILING **ADDRESS** Change of Address TX **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 323-0990 x101 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 X August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 06/26/2020 07/25/2020 **GO TO PAGE 2**

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Austin Apartment Ass	0009044	7		
14 COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	3. Officeholders			
	Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION	1	D POLITICAL CONTRIBUTIONS (OTHER THAN	<u> </u>	
TOTALS	PLEDGES, LOANS,	OR GUARANTEES OF LOANS) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	AL CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	600.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL I	3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED		
	4. TOTAL POLITICAL EXPENDITURES			3,150.00
CONTRIBUTION BALANCE	1	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		110,106.20
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			0.00
16 AFFIDAVIT	<u> </u>		<u> </u>	
		I swear, or affirm, under penalty of petrue and correct and includes all inforrunder Title 15, Election Code.		
		Emily	/ Blair	
		Signature of Car	npaign Treas	surer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said _	, tr	nis the	day
		which, witness my hand and seal of office.		
Cierratura (ff	admaininta diserse e ed	Drinted game of off-care desired	T(4) - 5 55	Baan administrativa a d
Signature of officer	auministering oath	Printed name of officer administering oath	i itie of off	ficer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

					3 of 7
17 CO	MMITTI	EE NAME	18 Filer ID	(Ethics Commissi	on Filers)
Au	stin Ap	00090447			
	HEDUL ME OF	SUBTOTAL	AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	600.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	Х	\$	0.00		
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO)R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	1	\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	3,150.00
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDU	. Е А1	
	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 1/1 Rpt: 4/7		
2	FILER NAME Austin Aparti	ment Association			3	Filer ID (Ethics Commission 00090447	ion Filers)	
4	Date 07/24/2020	Date 5 Full name of contributor out-of-state PAC (ID#:)			7	Amount of Contribution (\$)	\$600.00	
8	Principal occu Sales Manaç	pation / Job title (See Instructions)		Employer (See Instructions Sherwin Williams Paints				

PLE	DGED CONTRIBU	TIONS			SCHEDULE	В	
The Instruction Guide explains how to complete this form. 2 FILER NAME Austin Apartment Association					Total pages Schedule B: Sch: 1/1 Rpt: 5/7		
					3 Filer ID (Ethics Commission Filers)		
<u></u>	OF UNITEMIZED PLED	GES			\$	0.00	
5 Date	6 Full name of pledgor	out-of-state PAC (II	D#:) 8	Amount of 9 In-kind description		
	7 Pledgor Address;	City; State; Zip Co	de		pledge (\$) (If applicable)		
				[Check if travel outside of Texas. Complete Sch	nedule T	
10 Principal	occupation / Job title (See Instru	uctions)	11 Employer (See In	11 Employer (See Instructions)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Serv	rices Salaries	/Wages/Contract Labor	OTHER (enter a	category not listed above)
orodit odra i dymoni	The Inst	ruction Guide explains how to c	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)
Sch: 1/2 Rpt: 6/7	Austin Apartment A	Association		00090447	
4 Date	5 Payee name			•	
07/24/2020	Arnold, David				
6 Amount (\$)	7 Payee address; (City; State; Zip C	Code		
\$550.00	12904 Schleicher 7	r			
Expenditure from corporate funds	Austin, TX 78732-2	2286			
8 PURPOSE			(b) Description		
OF	Contribution Refun	es listed at the top of this schedule)	· — ·	outside of Texas. Com	plete Schedule T.
EXPENDITURE	Continuation Retain	u		n, TX, officeholder living	•
			Contribution	refund for canc	eled event.
9 Complete ONLY if direct	Candidate/Officeholde	name Office so	pught	Office he	eld
expenditure to benefit C/OI	ł				
Date	Payee name				
07/24/2020	Holden, Blair				
Amount (\$)	Payee address; (City; State; Zip C	Code		
\$550.00	10801 Hammerly E	slvd			
·	#132				
Expenditure from	Houston, TX 77043)			
corporate funds	<u> </u>		[n-x =		
PURPOSE OF		es listed at the top of this schedule)	(b) Description	outside of Texas. Com	nloto Cohodulo T
EXPENDITURE	Contribution refund		1 	n, TX, officeholder living	
			ı —	refund for cance	
Complete ONLY if direct	Candidate/Officeholde	name Office so	 ought	Office he	eld
expenditure to benefit C/OI	1				
Date	Payee name				
07/24/2020	Ng-Wurster, Jou				
Amount (\$)		City; State; Zip C	`ode		
\$550.00	5718 Westheimer I	•	oue		
Ψ550.00		\u			
Expenditure from	#1300				
corporate funds	Houston, TX 77057	,			
PURPOSE OF	(a) Category (See Categor	es listed at the top of this schedule)	(b) Description		
EXPENDITURE	Contribution refund		I <u>—</u>	outside of Texas. Com	
			_ _	n, TX, officeholder living refund for cance	
			Continuation	TOTALIA IOI CAIIC	oica event.
Complete ONLY if direct	Candidate/Officeholde	name Office so		Office he	ald.
expenditure to benefit C/OI		name Office 30	-ag.it	Onice ne	J.G.

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Contributing Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ical Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID	(Ethics Commission Filers)
	Sch: 2/2 Rpt: 7/7	Austin Apartment Association 00090447	
4	Date	5 Payee name	
	06/26/2020	Rodriguez, Eddir (Rep.)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,500.00	P.O. Box 2436	
	Expenditure from corporate funds	Austin, TX 78768	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Campaign contribution Check if travel outside of Texas. Co	-
		Check if Austin, TX, officeholder livi	
		Special election campaign	contribution.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office	held