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** 11/02/2020 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 August 5 November 5 December 5 March 5 September 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 09/26/2020 10/25/2020

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID (Ethics Commission Filers)					
Austin Apartment Asso	0009044	47				
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS,	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS) qualifies for the higher itemization threshold	\$	0.00		
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	4,350.00		
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED			0.00		
	4. TOTAL POLITICA	\$	0.00			
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			115,862.00		
OUTSTANDING LOAN TOTALS	I	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00		
16 AFFIDAVIT		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.				
			/ Blair			
Signature of Campaign Treasurer						
AFFIX NOTARY	/ STAMP / SEAL ABOVE					
	Sworn to and subscribed before me, by the said, this the,					
of	_, 20, to certify \	which, witness my hand and seal of office.				
Signature of officer ad	dministering oath	Printed name of officer administering oath	Title of o	fficer administering oath		

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3 3 of 7

					3 of 7
17 CO	MMITTI	EE NAME	18 Filer ID	(Ethics Comm	ission Filers)
Au	stin Ap				
	HEDUL ME OF	SUBTOT	AL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	4,350.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	
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		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.	X	SCHEDULE E: LOANS		\$	0.00
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	0.00
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	\$	
				•	

	WONET	ARY POLITICAL (ONTRIBUTIO	ONO		SCHEDUL	E A1	
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/7		
2	FILER NAME Austin Apartment Association				3 Filer ID (Ethics Commission File 00090447			
4	Date 10/15/2020	 5 Full name of contributor Arvizu, Noel 6 Contributor address; City; St 12852 Steadman Farms)	7	Amount of Contribution (\$)	\$600.00	
		Fort Worth, TX 76244		1	L			
8	Account Mar	pation / Job title (See Instructions nager	s)	9 Employer (See Instructions ADT Security - Multifam				
	Date 10/22/2020	Full name of contributor Credeur, Scott Contributor address; City; St 1500 Clovis R Baker	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$300.00	
	Principal occu	San Marco, TX 78666 pation / Job title (See Instructions	<u> </u>	Employer (See Instructions	<u> </u> s)			
	Sales Repre		,	Maintenance Supply He				
	Date 10/23/2020	Full name of contributor Leonard, Eric Contributor address; City; St 547 Peakside Circle	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$300.00	
		Dripping Springs, TX 786	20					
	Principal occu VP of Sales	pation / Job title (See Instructions	s)	Employer (See Instructions We Do Trash	s)			
	Date 10/20/2020	Full name of contributor Manicias, Gilberto Contributor address; City; St 9804 Capitol View Austin, TX 78747				Amount of Contribution (\$)	\$600.00	
	Principal occupation / Job title (See Instructions) Project Manager			Employer (See Instructions Guardian Construction	s)			
	Date 10/01/2020	Full name of contributor Needham, Teri Contributor address; City; St 12521 Belcara Place Austin, TX 78732	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$600.00	
		pation / Job title (See Instructions	5)	Employer (See Instructions	5)			
	Operations N	Manager		PS Landscapes				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/7		
2	FILER NAME Austin Apart	ment Association		3	Filer ID (Ethics Commission 00090447	n Filers)	
4	Date 10/01/2020	 Full name of contributor out-of-state PAC (ID#:_Nelson, Miriam Contributor address; City; State; Zip Code PO Box 91448 Austin, TX 78709 		7	Amount of Contribution (\$)	\$600.00	
8	Principal occu Manager	pation / Job title (See Instructions)	Employer (See Instructions FIDUS Construction)			
	Date 10/05/2020	Full name of contributor out-of-state PAC (ID#:_ Orlando, Stave Contributor address; City; State; Zip Code 217-A South Commons Ford Rd Austin, TX 78733			Amount of Contribution (\$)	\$600.00	
Principal occupation / Job title (See Instructions) Project Manager			Employer (See Instructions Wilson Roofing)			
	Date 10/09/2020	Full name of contributor out-of-state PAC (ID#:_Pena, Daniel Contributor address; City; State; Zip Code 113 Bethpage Drive Hutto, TX 78634			Amount of Contribution (\$)	\$600.00	
	Principal occu Sales Manag	pation / Job title (See Instructions) ger	Employer (See Instructions Rasa Floors)			
	Date 10/22/2020	Full name of contributor out-of-state PAC (ID#:_ Sanchez, Christy Contributor address; City; State; Zip Code 11227 West Cave Blvd Dripping Springs, TX 78620			Amount of Contribution (\$)	\$150.00	
	Principal occu Regional Ma	pation / Job title (See Instructions) anager	Employer (See Instructions Bainbridge Properties)			

PLEDGED CONTRIBUTIO	NS	SCHEDULE B	
The Instruction Guide explains	how to complete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 6/7	
2 FILER NAME Austin Apartment Association			
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
5 Date 6 Full name of pledgor	out-of-state PAC (ID#:)	8 Amount of pledge (\$) 9 In-kind description (If applicable)	
7 Pledgor Address; Cit	; State; Zip Code	I I I Check if travel outside of Texas. Complete Schedule	
10 Principal occupation / Job title (See Instructions)	11 Employer (See Instru	l —	

	LOANS						SCHEDUL	ΕE
	The Instruction Guide explains how to complete this form				otal pages ch: 1/1 R	ges Schedule E: 1 Rpt: 7/7		
2	FILER NAME Austin Apartmer	nt Association				iler ID (E 0090447	Ethics Commission F	ilers)
4	TOTAL OF UN	IITEMIZED LOANS			<u> </u>	\$		0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9	Loan Amount (\$)	
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code			Interest Rate	
						11	. Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Ins	structions)	•		
14	Description of Coll	ateral		15 Check if personal	funds were dep	posited into	o political account (See Instructions)	
16	GUARANTOR INFORMATION	17 Name of guarantor				19	Amount Guarantee	d (\$)
	not applicable	18 Guarantor address; City;	State;	Zip Code				
20	Principal occupation	on		21 Employer (See Ins	structions)			