

OCC RECEIVED AT. OCT 31'18 PM4:34

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

1	Committee N	ame*						
COMMITTEE NAME	CAFPAC					·		
2	Address/ PO	Вох			Apart	tment or S	Suite Number	
COMMITTEE	4701 Gillis St							
ADDRESS	City				State		Zip Code	•
	Austin				TX		78745	
3	Title	First Name					Middle Initial	
COMMITTEE TREASURER	Mr.	Jeffrey					L.	
NAME	Nickname		Last Name					Suffix
		·	Hahn					
	Address/ PO	Вох			Apart	tment or :	Suite Number	
4 COMMITTEE TREASURER	4200 Marath	on Blvd			Suite	300		
ADDRESS	City		٠	•	State		Zip Code	
AUDRESS	Austin				TX		78756	
5	Start Date (yyyymmdd)* End Date (yyyymm		(yyyymmdd)*	÷				
REPORTING PERIOD	20180928			THROUGH	2	20181027		

^{*} Indicates a required field

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

AFFIDAVIT

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

Signature of Affiant



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

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

CONTRIBUTOR NAME	Contributor Title Contributor First Name* Bob	
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*	Contributor Suffix
,	Barnes	
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number
CONTRIBUTOR	500 W 5th St	#100
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*
AND	Austin	TX 78701
EMPLOYER	Contributor Employer	Contributor Occupation
	IBC Bank	President
	Per City Code 2-2-29(d), employer and occupation are required	for individuals whose contribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
CONTRIBUTION	20181022	\$1,000.00
DETAILS	In-Kind Contribution Description, if applicable	
1		



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

(Attach to Form ATX.7PAC Coversheet)

Itemize each contribution in Sections 1-3.

For additional contributions, click "Add Another Contribution Page" below.

* Indicates a required field

1 CONTRIBUTOR NAME	Contributor Title Contributor First Name*	
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*	Contributor Suffix
	Bukowski	
2 CONTRIBUTOR	Contributor Address/ PO Box* 2210 West Dallas St	Contributor Apartment or Suite Number Apt 1313
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*
AND	Houston	TX 77019
EMPLOYER	Contributor Employer	Contributor Occupation
	Bukowski Law Firm	Legal
	Per City Code 2-2-29(d), employer and occupation are required	for individuals whose contribution is \$200 or more
· ·	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
CONTRIBUTION	20181026	\$7,500.00
DETAILS	In-Kind Contribution Description, if applicable	



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

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

1 CONTRIBUTOR NAME	Contributor Title Contributor First Name* Jeffery	
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*	Contributor Suffix
	Hahn	
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number
CONTRIBUTOR	6700 Hot Springs Dr	
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*
AND	Austin	TX 78749
EMPLOYER	Contributor Employer	Contributor Occupation
	Hahn Public Communications	Principal
	Per City Code 2-2-29(d), employer and occupation are required	for individuals whose contribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
CONTRIBUTION	20181026	\$2,500.00
DETAILS	In-Kind Contribution Description, if applicable	
	<u> </u>	



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

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

	<u> </u>	
1 CONTRIBUTOR	Contributor Title Contributor First Name*	
NAME	Ward	
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*	Contributor Suffix
	Tisdale	
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number
CONTRIBUTOR	4701 Gillis St	
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*
AND	Austin	TX 78745
EMPLOYÉR.	Contributor Employer	Contributor Occupation
· · · · · · · · · · · · · · · · · · ·	The Center for Austin's Future	Executive Director
	Per City Code 2-2-29(d), employer and occupation are required	for individuals whose contribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
CONTRIBUTION	20181022	\$5,500.00
DETAILS	In-Kind Contribution Description, if applicable	
•		



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

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

1		
CONTRIBUTOR NAME	Contributor Title Contributor First Name*	
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*	Contributor Suffix
	Turner	
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number
CONTRIBUTOR	515 South Cap of TX Hwy	Suite 250
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*
AND	Austin	TX 78701
EMPLOYER	Contributor Employer	Contributor Occupation
	Wentwood Co.	CEO
	Per City Code 2-2-29(d), employer and occupation are required	for individuals whose contribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
CONTRIBUTION	20181024 .	\$10,000.00
DETAILS	In-Kind Contribution Description, if applicable	
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Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

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1 CONTRIBUTOR NAME	Contributor Title Contributor First Name* Warren	
Contributor is an individual	Organization Name or Contributor Last Name, as applicable *	Contributor Suffix
	Walters	
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number
CONTRIBUTOR	2300 Barton Creek Blvd	Unit 44
ADDRESS	Contributor City*	Contributor State * Contributor Zip Code *
AND	Austin	TX 78735
EMPLOYER	Contributor Employer	Contributor Occupation
	W2 Real Estate Partners	CEO
	Per City Code 2-2-29(d), employer and occupation are required for	or individuals whose contribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
CONTRIBUTION	20181004	\$5,000.00
DETAILS	In-Kind Contribution Description, if applicable	



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

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

1		
CONTRIBUTOR		
NAME		•
Contributor is an individual	Organization Name or Contributor Last Name, as	is applicable*
	Austin Apartment Association PAC Committee	
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number
CONTRIBUTOR	4107 Medial Pkwy	#100
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*
AND	Austin	TX 78756
EMPLOYER	Contributor Employer	Contributor Occupation
	Austin Apartment Association PAC Committee	PAC
	Per City Code 2-2-29(d), employer and occupatio	on are required for individuals whose contribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
CONTRIBUTION	20181011	\$5,000.00
DETAILS	In-Kind Contribution Description, if applicable	



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

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

1			
CONTRIBUTOR			
NAME			
Contributor is an individual	Organization Name or Contributor Last Name, as applicable *		•
	Austin Hotel & Lodging Assoc		
2	Contributor Address/ PO Box*	Contributor Apartm	ent or Suite Number
CONTRIBUTOR	PO Box 82431		
ADDRESS	Contributor City*	Contributor State*	Contributor Zip Code*
AND	Austin	TX	78708
EMPLOYER	Contributor Employer	Contributor Occupa	tion
	Austin Hotel & Lodging Assoc	Hospitality	
	Per City Code 2-2-29(d), employer and occupation are required	for individuals whose co	ontribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Am	nount*
CONTRIBUTION	20181022	\$10,000.00	
DETAILS	In-Kind Contribution Description, if applicable		The state of the s
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Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

	<u> </u>	
1		
CONTRIBUTOR		
NAME		
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*	
	Bukowski Law Firm	•
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number
CONTRIBUTOR	1601 Rio Grande St	Suite 300A
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*
AND	Austin	TX 78701
EMPLOYER .	Contributor Employer	Contributor Occupation
	Bukowski Law Firm	Legal
	Per City Code 2-2-29(d), employer and occupation are required	l for individuals whose contribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
CONTRIBUTION	20181026	\$7,500.00
DETAILS	In-Kind Contribution Description, if applicable	
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Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

1	·	
CONTRIBUTOR		
NAME		
Contributor is an individual	Organization Name or Contributor Last Name; as applicable *	
	CREA Capital, LLC	
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number
CONTRIBUTOR	1601 S Mopac Expwy	Suite 0-175
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*
AND	Austin	TX 78746
EMPLOYER	Contributor Employer	Contributor Occupation
	CREA Capital, LLC	Real Estate
·	Per City Code 2-2-29(d), employer and occupation are required for	or individuals whose contribution is \$200 or more
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*
CONTRIBUTION	20181011	\$10,000.00
DETAILS	In-Kind Contribution Description, if applicable	
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Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

1			
CONTRIBUTOR			
NAME			
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*		
	PSW Real Estate		
2	Contributor Address/ PO Box*	Contributor Apartment or Suite Number	
CONTRIBUTOR	2003 S 1st Street		
ADDRESS	Contributor City*	Contributor State* Contributor Zip Code*	
AND	Austin	TX 78704	
EMPLOYER	Contributor Employer	Contributor Occupation	
	PSW Real Estate	Real Estate	
	Per City Code 2-2-29(d), employer and occupation are required f	or individuals whose contribution is \$200 or more	
3	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*	
CONTRIBUTION	20181016	\$10,000.00	
DETAILS	In-Kind Contribution Description, if applicable		
•	·		
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Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

	·		
1			
CONTRIBUTOR			
NAME			
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*		
	Texas Association of Builders		
2	Contributor Address/ PO Box*	Contributor Apartm	ent or Suite Number
CONTRIBUTOR	313 12th Street	Ste 210	
ADDRESS	.Contributor City*	Contributor State*	Contributor Zip Code*
AND	Austin	TX	78701
EMPLOYER	Contributor Employer	Contributor Occupation	
	Texas Association of Builders	Trade Association	
4.	Per City Code 2-2-29(d), employer and occupation are required for	or individuals whose co	ontribution is \$200 or more
3 . >	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*	
CONTRIBUTION	20181004	\$5,000.00	
DETAILS	In-Kind Contribution Description, if applicable		
·			



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

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

1			
CONTRIBUTOR	<u> </u>	N.	
NAME			
Contributor is an individual	Organization Name or Contributor Last Name, as applicable*		No.
	Texas Equity PAC		
2	Contributor Address/ PO Box*	Contributor Apartme	ent or Suite Number
CONTRIBUTOR	PO Box 2340		•
ADDRESS	Contributor City*	Contributor State*	Contributor Zip Code*
AND	Austin	тх	78768 ,
EMPLOYER	Contributor Employer	Contributor Occupation	
	Texas Equity PAC	PAC	
	Per City Code 2-2-29(d), employer and occupation are required	for individuals whose co	ontribution is \$200 or more
3 CONTRIBUTION	Contribution Date (yyyymmdd)*	(\$) Contribution Amount*	
	20181011	\$2,000.00	
DETAILS	In-Kind Contribution Description, if applicable		
•			



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

Expenditure

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

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

* Indicates a required field

PAYEE			
NAME	Organization Name or Payee Last Name, as applicable*		
Payee is an individual	IBC Bank		
2	Payee Address/ PO Box*	Payee Apartment or	r Suite Number
PAYEE	500 W 5th St	#100	
ADDRESS	Payee City*	Payee State*	Payee Zip Code*
٠	Austin	тх	78701
3	Category*	(\$) Expenditure Am	ount*
EXPENDITURE	Accounting/Banking	\$14.95	
DETAILS	Description (If Category is "Other")	Expenditure Date*	
•	Bank Fee	20181023	

Add Another Expenditure Page



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

Expenditure

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

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

1				
PAYEE			• •	
NAME	Organization Name or Payee Last Name, as applicable *	_		
Payee is an individual	IBC Bank	;		
2	Payee Address/ PO Box*	Payee Apartment	or Suite Number	
PAYEE	500 W 5th St	#100		
ADDRESS	Payee City*	Payee State*	Payee Zip Code*	
	Austin	тх	78701	
3	Category*	(\$) Expenditure A	mount*	
EXPENDITURE	Accounting/Banking	\$12.50		
DETAILS	Description (If Category is "Other")	Expenditure Date	Expenditure Date*	
	Bank Fee	12.50	•	

Add Another Expenditure Page