

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

1	Committee Name*							
COMMITTEE NAME	Austin Police Association PAC							
2	Address/ PO Box				Apartment or Suite Number			
COMMITTEE	5817 Wilcab Road City							
ADDRESS					State Zip Code			
•	Austin				TX 78721			
3	Title First Name				Middle Initial			
COMMITTEE TREASURER	Mrs. Valencia							
NAME	Nickname Last Name				Suffix			
	Val		Escobar					
_	Address/ PO Box				Apartment or Suite Number			
4 COMMITTEE TREASURER ADDRESS	4103 Cisco Valley Drive							
	City				State Zip Co		Zip Code	
ADDRESS	Round Rock			тх			78664	
25	Start Date (yyyymmdd)*					End Date (yyyymmdd)*		
REPORTING PERIOD	20181203		THROUGH		20181210			

^{*} Indicates a required field



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

AFFIDAVIT

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

Signature of Affiant

Contribution



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

(Attach to Form ATX.7PAC Coversheet)

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

* Indicates a required field

CONTRIBUTOR NAME Contributor is an individual	Contributor Title Contributor First Name* Organization Name or Contributor Last Name, as applicable*	Contributor Suffix
2		
CONTRIBUTOR ADDRESS AND EMPLOYER	Contributor Address/ PO Box* Contributor City* Contributor Employer Per City Code 2-2-29(d), employer and occupation are required	Contributor Apartment or Suite Number Contributor State* Contributor Zip Code* Contributor Occupation d for individuals whose contribution is \$200 or more
3 CONTRIBUTION DETAILS	Contribution Date (yyyymmdd)* In-Kind Contribution Description, if applicable	(\$) Contribution Amount*

Add Another Contribution Pege



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

Expenditure

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(Attach to Form ATX.7PAC Coversheet)

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

PA	YEE				
NA	ME	Organization Name or Payee Last Name, as applicable*			
Payee is	s an individual	Guardian Public Strategies		د	
2		Payee Address/ PO Box*	Payee Apartment of	or Suite Number	
PAYEE		815-A Brazos Street	Suite 304		
ADD	RESS	Payee City*	Payee State*	Payee Zip Code*	
		Austin	тх	78701	
3		Category*	(\$) Expenditure Ar	mount*	
EXPENDITURE DETAILS		Printing Expense	\$10,381.82		
		Description (If Category is "Other") Expenditure Date*			
			20181206		

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