#### 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) 00090456 3 COMMITTEE NAME **OFFICE USE ONLY** The Real Estate Council of Austin, Inc. Advancing Democracy PAC Date Received **ELECTRONICALLY FILED** 08/04/2020 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 98 San Jacinto Blvd. Suite 510 Change of Address Austin, TX 78701 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Susan NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Harris CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 98 San Jacinto Blvd. STREET **ADDRESS** Suite 510 (Residence or Business) Austin, TX 78701 **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) 320-4151 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

### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
The Real Estate Counc	cil of Austin, Inc. Advanc	cing Democracy PAC	00090456	
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		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS,	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,118.69
EXPENDITURE TOTALS	3. TOTAL POLITICAL E	IZED \$	0.00	
	4. TOTAL POLITICA	\$	12,000.00	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	8,070.73
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
			n Harris	
		Signature of Ca	mpaign Treasu	rer
AFFIX NOTAR)	STAMP / SEAL ABOVE			
		, tl	his the	day
of	_, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer ac	dministering oath	Printed name of officer administering oath	Title of office	cer administering oath

### **SUBTOTALS - MPAC**

### FORM MPAC COVER SHEET PG 3

			3 of 6
17 COMMITT	EE NAME	18 Filer ID	(Ethics Commission Filers)
The Real	,		
19 SCHEDUL NAME OF	SUBTOTAL AMOUNT		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	\$	
6. X	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$ 266.86
7. X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$ 851.83	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 12,000.00
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

# MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

The Instru	ction Guide explains how to complete this form.	1	1 Total pages Schedule C3: Sch: 1/1 Rpt: 4/6			
2 FILER NAME The Real Es	tate Council of Austin, Inc. Advancing Democracy PAC	3	Filer ID 00090456	(Ethics Commission Filers)		
4 Date	5 Corporation / Labor Organization name	6	Amount (\$)			
06/30/2020	RECA			74.36		
Date	Corporation / Labor Organization name		Amount (\$)			
07/09/2020	RECA			192.50		

# NON-MONETARY SUPPORT FROM CORPORATION SCHEDULE C4 **OR LABOR ORGANIZATION** 1 Total pages Schedule C4: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/6 2 FILER NAME 3 Filer ID (Ethics Commission Filers) The Real Estate Council of Austin, Inc. Advancing Democracy PAC 00090456 5 Corporation / Labor Organization name 6 Amount (\$) 07/25/2020 **RECA** 851.83

#### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co			Food/Beverage Expense Polling Expense by - Gift/Awards/Memorials Expense Printing Expense al Committee Legal Services Salaries/Wages/Contract			se nse		Travel in District Travel Out of District OTHER (enter a category not listed above)		
	Credit Card Payment			The Instruction Gui	de explains	how to comp	lete this form.			
1	Total pages Schedule F1: Sch: 1/1 Rpt: 6/6	2		E Estate Council of A	Austin, Inc.	Advancing	g	3	Filer ID 00090456	(Ethics Commission Filers)
┢	Date	5	Payee name							
•	07/10/2020			int Messaging						
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Code				
	\$12,000.00		1440 Bedd	lington Park						
Х	Expenditure from corporate funds		Nashville ,	TN 37215						
8	PURPOSE	(a)	Category (	See Categories listed at the	top of this sch	edule) (b	<b>Description</b>			
	OF EXPENDITURE		Consulting	Expense						nplete Schedule T.
							Consulting E		, officeholder livin	g expense
							Consulting L	-^pc	51130	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Of	ficeholder name	C	Office sough	t		Office h	eld
	experialture to benefit C/O	П								