### MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

### FORM MPAC COVER SHEET PG 1

L							
Tł	ne MPAC Instruction (	2 Total pages filed: 5					
3	COMMITTEE NAME	OFFICE USE ONLY					
	Building Owners ar	d Managers Association of Austin P	Political Action Committee				
		Date Received ELECTRONICALLY FILED 07/01/2024					
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE	#; CITY; STATE; ZIP				
	ADDRESS	P.O. Box 201742					
	Change of Address	Austin, TX 78720					
				Date Hand-delivered or Date Postmarked			
5	CAMPAIGN TREASURER	MS / MRS / MR FIR:	ST MI				
	NAME	Mrs. Jes	sica	Receipt # Amount			
				Date Processed			
		NICKNAME LAS	ST SUFFIX				
		Kar	Isruher	Date Imaged			
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLE	ASE); APT / SUITE #; CITY; ST	ATE; ZIP CODE			
ľ	TREASURER	11408 SW Oaks					
	STREET	11408 SVV Oaks					
	ADDRESS						
	(Residence or Business)	Austin, TX 78737					
<b>-</b>	CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; ST	ATE; ZIP CODE			
Ľ	TREASURER		AFT/SUILE#, CITT, ST	RTE, ZIF CODE			
	MAILING	11408 SW Oaks					
	ADDRESS						
	Change of Address	Austin, TX 78737					
8	CAMPAIGN	AREA CODE PHONE NUME	BER EXTENSION				
TREASURER							
	PHONE	(202) 306-8656					
┝	REPORT TYPE						
٩,	REPORT TIPE	X Monthly	10th day after campaign	Dissolution (Attach PAC-DR)			
			L treasurer termination				
10	MONTHLY		<b>1</b>				
	REPORT FILING	January 5	April 5 July 5	October 5			
1	DEADLINE	February 5	May 5 August 5	November 5			
		March 5 X	June 5 September 5	December 5			
11	L PERIOD	Month Day Year	Month	Day Year			
	COVERED	04/26/2024	THROUGH 05/25/2				
⊢			00,20,2	-			
	GO TO PAGE 2						
Fo	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.d378aba0						

### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID	er ID (Ethics Commission Filers)					
Building Owners and M	anagers Association of	Austin Political Action Committee	00055546				
14 COMMITTEE ACTIVITY	1. 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					
	2. 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 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)   Image: check here if this report qualifies for the higher itemization threshold				0.00			
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00			
EXPENDITURE TOTALS	\$	0.00					
	\$	0.00					
CONTRIBUTION BALANCE	DAY \$	0.00					
OUTSTANDING LOAN TOTALS	THE \$	0.00					
16 AFFIDAVIT	•		•				
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.					
		Mrs. Jessic	a Karlsruher				
		Signature of Ca	mpaign Treasu	rer			
AFFIX NOTARY	STAMP / SEAL ABOVE						
Sworn to and subscribed before me, by the said day							
	of, 20, to certify which, witness my hand and seal of office.						
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offic	er administering oath			
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.d378aba0			

#### FORM MPAC COVER SHEET PG 3

3 of 5

17 000	17 COMMITTEE NAME 18 Filer ID (Ethics Commission Filers)							
	ding C	(Ethics Commission Filers)						
19 SCH NAM	IEDULE 1E OF \$	SUBTOTAL AMOUNT						
1.	X	<b>\$</b> 0.00						
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	<b>\$</b> 0.00					
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS	<b>\$</b> 0.00					
4.		\$						
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	TION 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.	Х	SCHEDULE E: LOANS		<b>\$</b> 0.00				
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	5	<b>\$</b> 0.00				
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		<b>\$</b> 0.00				
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	<b>\$</b> 0.00				
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		<b>\$</b> 0.00				
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$				
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$				

**SUBTOTALS - MPAC** 

## **PLEDGED CONTRIBUTIONS** SCHEDULE B 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/5 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Building Owners and Managers Association of Austin Political Action Committee 00055546 4 \$ 0.00 TOTAL OF UNITEMIZED PLEDGES In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9 1 (If applicable) pledge (\$) ..... 7 Pledgor Address; City; State; Zip Code Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

LOANS							SCHE	EDULE E	
The Instruction Guide explains how to complete this form.					1 Total pages Schedule E: Sch: 1/1 Rpt: 5/5				
2 FILER NAME 3							iler ID (Ethics Commission Filers) 0055546		
<sup>4</sup> TOTAL OF UN	<sup>4</sup> TOTAL OF UNITEMIZED LOANS						\$	0.00	
5 Date of loan	7 Name of lender	0	ut-of-state PA	C (ID#:		)	9 Loan Amoun	t (\$)	
6 Is lender a financial institution?	8 Lender address;	City;	State;	Zip Code			10 Interest Rate		
							11 Maturity Date	<u>}</u>	
12 Principal occupation	on / Job title (See Instruct	ions)		13 Employer (See Instruc	ctions)				
14 Description of Coll	ateral			15 Check if personal func	ds were	e depositec	l into political acco (See Instruct		
16 GUARANTOR INFORMATION	<b>17</b> Name of guarantor						19 Amount Gua	ranteed (\$)	
not applicable	<b>18</b> Guarantor address;	City;	State;	Zip Code					
20 Principal occupation	<u>l</u> on			21 Employer (See Instruc	ctions)		<u> </u>		