#### 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) 00016609 3 COMMITTEE NAME **OFFICE USE ONLY** Corpus Christi Apartment Association Better Government Fund Date Received **ELECTRONICALLY FILED** 07/02/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 6537 S. Staples Ste125 **PMB 338** Change of Address Corpus Christi, TX 78413 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mrs. Mary M. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Green CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 5151 Flynn Pkwy Pwky STREET **ADDRESS PMB 338** (Residence or Business) Corpus Christi, TX 78411 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 5402 S. Staples #207 MAILING **ADDRESS** Change of Address Corpus Christi, TX 78411 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (361) 852-2787 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 X July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 05/26/2024 06/25/2024

**GO TO PAGE 2** 

### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

| COMMITTEE ACTIVITY    CAttach lasts on plain paper to complete flag dentity by party.)   |                         |                          |  | T           |                              |
|--|-------------------------|--------------------------|--|-------------|------------------------------|
| COMMITTEE  | 2 COMMITTEE NAME        | A                        | N  |             |                              |
| ACTIVITY    Common in composition in the compositio |                         | ent Association Better G |  | 00016       | 609                          |
| A. Supported  2. Measures (Orser/bit by date and leation of disclorin and nature of fosion)  3. Officeholders Assisted (Identify prime or, if application of disclorin and nature of fosion)  B. Opposed  CONTRIBUTION  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN particular of disclorin and nature of fosion)  2. TOTAL POLITICAL CONTRIBUTIONS  CONTRIBUTION  2. TOTAL POLITICAL CONTRIBUTIONS  3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  3. TOTAL POLITICAL EXPENDITURES  4. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  OUTSTANDING  CONTRIBUTION  6. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  6. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  6. TOTAL POLITICAL EXPENDITURES  6. TOTAL POLITICAL EXPENDITURES  7. TOTAL POLITICAL EXPENDITURES  8. O.O.  OUTSTANDING  1. SWEAT, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  6. TOTAL POLITICAL EXPENDITURES my hand and seal of office.   | 4 COMMITTEE<br>ACTIVITY |                          | A. Supported                               |             |                              |
| 2. Measures Cestife by date and location of electron and returns of electron of electron and returns of electron of electron and returns of electron a | ACTIVITI                |                          |  |             |                              |
| 2. Measures Cestife by date and location of electron and returns of electron of electron and returns of electron of electron and returns of electron a | (Attach lists on plain  |                          |  |             |                              |
| 2. Measures Describe by date and location of election and nature of issue)  B. Opposed  3. Officeholders Assisted Genetity by name of inspectation and nature of issue)  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PERCENT AND PERCENT A | paper to complete this  |                          | B. Opposed                                 |             |                              |
| CONTRIBUTION   1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   \$ 0.00  | report ii necessary.,   |                          |  |             |                              |
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| CONTRIBUTION TOTALS  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR SUARANTEES OF LOANS)  2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  4. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  6. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  OUTSTANDING LOAN TOTALS  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  AFFIDAVIT  I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Swom to and subscribed before me, by the said   |                         |                          | A. Supported                               |             |                              |
| 3. Officeholders Assisted Udentify by party parame or if Odentify by party parameters of LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)    Check here if this repropression of the higher termization threshold   Check here if this repropression parameters of LOANS, OR CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   S. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   A. TOTAL POLITICAL EXPENDITURES   S. 0.00   CONTRIBUTION   OF THE REPORTING PERIOD   S. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD   S. 11,386.24  OUTSTANDING   C. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   S. 0.00  AFFIDAVIT   I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and foundes all information required to be reported by me under Title 15. Election Code.    Mrs. Mary M. Green   |                         |                          |  |             |                              |
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| ASSISTED  CONTRIBUTION TOTALS  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  EXPENDITURE TOTALS  3. TOTAL UNITEMIZED POLITICAL EXPENDITURES  4. TOTAL POLITICAL EXPENDITURES  5. TOTAL POLITICAL EXPENDITURES  6. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  OUTSTANDING LOAN TOTALS  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  AFFIDAVIT  I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said  |                         |                          | B. Opposed                                 |             |                              |
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| CONTRIBUTION TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  3. TOTAL POLITICAL EXPENDITURES  4. TOTAL POLITICAL EXPENDITURES  5. O.00  CONTRIBUTION BALANCE  5. TOTAL POLITICAL EXPENDITURES  5. O.00  CONTRIBUTION BALANCE  6. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  OF THE REPORTING PERIOD  AFFIDAVIT  1 swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said   |                         | 1                        |  |             |                              |
| PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)    check here if this report qualifies for the higher itemization threshold   2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   \$ 210.00     EXPENDITURE TOTALS   3. TOTAL UNITEMIZED POLITICAL EXPENDITURES   \$ 0.00     4. TOTAL POLITICAL EXPENDITURES   \$ 0.00     5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD   \$ 11,386.24     OUTSTANDING LOAN TOTALS   6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   \$ 0.00     AFFIDAVIT   |                         |                          |  |             |                              |
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| CONTRIBUTIONS MADE ELECTRONICALLY)   check here if this report qualities for the higher fremization threshold   2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   \$ 210.00     EXPENDITURE TOTALS   3. TOTAL UNITEMIZED POLITICAL EXPENDITURES   \$ 0.00     4. TOTAL POLITICAL EXPENDITURES   \$ 0.00     5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD   \$ 11,386.24     OUTSTANDING LOAN TOTALS   6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD   \$ 0.00     AFFIDAVIT   I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.     Mrs. Mary M. Green   Signature of Campaign Treasurer     AFFIX NOTARY STAMP / SEAL ABOVE   Sworn to and subscribed before me, by the said, this the day of, to certify which, witness my hand and seal of office.  |                         | PLEDGES, LOANS,          | OR GUARANTEES OF LOANS, OR                 | \$          | 0.00                         |
| 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)   \$ 210.00   |                         | 1 <del></del>            | ,  |             | 0.00                         |
| CONTRIBUTION   S   CONTRIBUTION   S   CONTRIBUTIONS  |                         |                          | · · · · · · · · · · · · · · · · · · ·      |             |                              |
| AFFIDAVIT  AFFIDAVIT  AFFIX NOTARY STAMP / SEAL ABOVE  S. TOTAL POLITICAL EXPENDITURES  S. 0.00  AFFIX NOTARY STAMP / SEAL ABOVE  S. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  S. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  S. 0.00  AFFIDAVIT  I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the day  of, 20, to certify which, witness my hand and seal of office.   |                         | (OTHER THAN PLEI         | DGES, LOANS, OR GUARANTEES OF LOANS)       | ٦           | 210.00                       |
| AFFIDAVIT  AFFIDAVIT  AFFIX NOTARY STAMP / SEAL ABOVE  S. TOTAL POLITICAL EXPENDITURES  S. 0.00  AFFIX NOTARY STAMP / SEAL ABOVE  S. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  S. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  S. 0.00  AFFIDAVIT  I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the day  of, 20, to certify which, witness my hand and seal of office.   | EXPENDITURE             | 3. TOTAL UNITEMIZE       | D POLITICAL EXPENDITURES                   |             |                              |
| CONTRIBUTION BALANCE  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  8 0.00  AFFIDAVIT  I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said of, to certify which, witness my hand and seal of office.  | TOTALS                  |                          |  | \$          | 0.00                         |
| CONTRIBUTION BALANCE  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  8 0.00  AFFIDAVIT  I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said of, to certify which, witness my hand and seal of office.  |                         | 4. TOTAL POLITICA        | L EXPENDITURES                             |             |                              |
| BALANCE OF THE REPORTING PERIOD \$ 11,386.24  OUTSTANDING LOAN TOTALS  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00  AFFIDAVIT  I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the day of, to certify which, witness my hand and seal of office.  |                         | _                        |  | *           | 0.00                         |
| BALANCE OF THE REPORTING PERIOD \$ 11,386.24  OUTSTANDING LOAN TOTALS  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 0.00  AFFIDAVIT  I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the day of, to certify which, witness my hand and seal of office.  | CONTRIBUTION            | 5. TOTAL POLITICAL (     |  | ГДАУ        |                              |
| AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, to certify which, witness my hand and seal of office.  \$ 0.00  Swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  | BALANCE                 | OF THE REPORTING         | G PERIOD                                   | \$          | 11,386.24                    |
| AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, to certify which, witness my hand and seal of office.  \$ 0.00  Swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  | OUTSTANDING             | 6. TOTAL PRINCIPAL       |  | THE         |                              |
| I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said   |                         |                          |  | \$          | 0.00                         |
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| true and correct and includes all information required to be reported by me under Title 15, Election Code.  Mrs. Mary M. Green  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said   | 6 AFFIDAVII             |                          |  |             |                              |
| under Title 15, Election Code.  Mrs. Mary M. Green  Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the day of, 20, to certify which, witness my hand and seal of office.   |                         |                          |  |             |                              |
| Mrs. Mary M. Green Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the day of, 20, to certify which, witness my hand and seal of office.  |                         |                          |  | rmation req | juired to be reported by me  |
| Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the day of, 20, to certify which, witness my hand and seal of office.   |                         |                          |  |             |                              |
| Signature of Campaign Treasurer  AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the day of, 20, to certify which, witness my hand and seal of office.   |                         |                          |  |             |                              |
| AFFIX NOTARY STAMP / SEAL ABOVE  Sworn to and subscribed before me, by the said, this the day of, to certify which, witness my hand and seal of office.  |                         |                          | Mrs. Ma                                    | ry M. Gree  | en                           |
| Sworn to and subscribed before me, by the said, this the day of, 20, to certify which, witness my hand and seal of office.   |                         |                          | Signature of Ca                            | ampaign Tr  | easurer                      |
| Sworn to and subscribed before me, by the said, this the day of, 20, to certify which, witness my hand and seal of office.   | VEELA NOTVE             | V STAMD / SEAL AROVE     |  |             |                              |
| of, 20, to certify which, witness my hand and seal of office.  | AFFIA NOTAN             | Y STAMP / SEAL ABOVE     |  |             |                              |
| of, 20, to certify which, witness my hand and seal of office.  | Sworn to and subscribe  | d before me, by the said |  | this the    | day                          |
| Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath   |                         |                          |  |             |                              |
| Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath   |                         |                          |  |             |                              |
| Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath   |                         |                          |  |             |                              |
| Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath   |                         |                          |  |             |                              |
|  | Signature of officer a  | dministering oath        | Printed name of officer administering oath | Title of    | f officer administering oath |

#### **SUBTOTALS - MPAC**

## FORM MPAC COVER SHEET PG 3

|     |   |  |                             | _                    | 3 of 5  |
|-----|---|--|-----------------------------|----------------------|---------|
|     |   | EE NAME<br>nristi Apartment Association Better Government Fund                   | <b>18</b> Filer ID 00016609 | (Ethics Commission I | Filers) |
|     |   | SUBTOTALS<br>SCHEDULE  |                             | SUBTOTAL AM          | OUNT    |
| 1.  | Х | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                    |                             | \$                   | 210.00  |
| 2.  |   | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                      |                             | \$                   |         |
| 3.  |   | SCHEDULE B: PLEDGED CONTRIBUTIONS  |                             | \$                   |         |
| 4.  |   | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION        | R                           | \$                   |         |
| 5.  |   | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION | TION OR                     | \$                   |         |
| 6.  |   | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA                     | ANIZATION                   | \$                   |         |
| 7.  |   | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION         |                             | \$                   |         |
| 8.  |   | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C                    | ORGANIZATION                | \$                   |         |
| 9.  |   | SCHEDULE E: LOANS  |                             | \$                   |         |
| 10. |   | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                 | 6                           | \$                   |         |
| 11. |   | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   |                             | \$                   |         |
| 12. |   | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION                 | DNS                         | \$                   |         |
| 13. |   | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                    |                             | \$                   |         |
| 14. |   | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION               | DNS                         | \$                   |         |
| 15. |   | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER    | RETURNED                    | \$                   |         |
|     |   |  |                             |                      |         |
|     |   |  |                             |                      |         |
|     |   |  |                             |                      |         |
|     |   |  |                             |                      |         |
|     |   |  |                             |                      |         |
|     |   |  |                             |                      |         |
| i   |   |  |                             |                      |         |

|   | MONET              | ARY POLITICAL CONTRIBUTION   | ONS                          |   | SCHEDULE                                      | E <b>A1</b> |
|---|--------------------|--|------------------------------|---|---|-------------|
|   | The Instru         | uction Guide explains how to complete this form.                     |                              |   | Total pages Schedule A1:<br>Sch: 1/2 Rpt: 4/5 |             |
| 2 | FILER NAME         |  |                              | 3 | Filer ID (Ethics Commission                   | r Filers)   |
|   | Corpus Chris       | sti Apartment Association Better Government Fund                     |                              |   | 00016609                                      |             |
| 4 | Date<br>06/25/2024 | <ul> <li>Full name of contributor</li></ul>                          | )                            | 7 | Amount of Contribution (\$)                   | \$35.00     |
|   |                    | Cleveland, OH 44115  |                              |   |   |             |
| 8 | Principal occu     | pation / Job title (See Instructions)                                | 9 Employer (See Instructions | ) |   |             |
|   | Date               | Full name of contributor out-of-state PAC (ID#:_                     | )                            |   | Amount of Contribution (\$)                   |             |
|   | 06/25/2024         | <u> </u>   |                              |   |   | \$35.00     |
|   |                    | Contributor address; City; State; Zip Code                           |                              |   |   |             |
|   |                    | laredo, TX 78401   |                              |   |   |             |
|   | Principal occu     | ipation / Job title (See Instructions)                               | Employer (See Instructions   | ) |   |             |
|   | Date               | Full name of contributor out-of-state PAC (ID#:_                     | )                            |   | Amount of Contribution (\$)                   |             |
|   | 06/24/2024         | Navigation Pointe  |                              |   |   | \$35.00     |
|   |                    | Contributor address; City; State; Zip Code  Corpus Christi, TX 78408 |                              |   |   |             |
|   | Dringing con       | <u> </u>   | Employer (Can Instructions   |   |   |             |
|   | Principal occu     | pation / Job title (See Instructions)                                | Employer (See Instructions   | ) |   |             |
|   | Date               | Full name of contributor out-of-state PAC (ID#:_                     | )                            |   | Amount of Contribution (\$)                   |             |
|   | 06/25/2024         | REIT Group   |                              |   |   | \$35.00     |
|   |                    | Contributor address; City; State; Zip Code                           |                              |   |   |             |
|   |                    | Corpus Christi, TX 78415   |                              |   |   |             |
|   | Principal occu     | pation / Job title (See Instructions)                                | Employer (See Instructions   | ) |   |             |
|   | Date               | Full name of contributor out-of-state PAC (ID#:_                     | )                            |   | Amount of Contribution (\$)                   |             |
|   | 06/25/2024         | STA Newman Hall  |                              |   |   | \$35.00     |
|   |                    | Contributor address; City; State; Zip Code                           |                              |   |   |             |
|   |                    | Kingsville, TX 78363   |                              |   |   |             |
|   | Principal occu     | pation / Job title (See Instructions)                                | Employer (See Instructions   | ) |   |             |
|   |                    | ·  |                              |   |   |             |

| TARY POLITICAL CONTRIBUT   | IONS  | SCHEDULE A1   |
|--|---|---|
| uction Guide explains how to complete this   | 1 Total pages Schedule A1:<br>Sch: 2/2 Rpt: 5/5   |   |
| FILER NAME  Corpus Christi Apartment Association Better Government Fund  |   | 3 Filer ID (Ethics Commission Filers) 00016609  |
| 5 Full name of contributor out-of-state PAC (ID the palms Phase II  6 Contributor address; City; State; Zip Code | #:)   | 7 Amount of Contribution (\$) \$35  |
| Aransas Pass, TX 78336   | 0 Employer (See Instruction   |   |
| cupation / Job title (See Instructions)  | Employer (See Instruction   | 15)   |
|  |   |   |
| L F  | isti Apartment Association Better Government Funds the palms Phase II  6 Contributor address; City; State; Zip Code | isti Apartment Association Better Government Fund  5 Full name of contributor  out-of-state PAC (ID#:) the palms Phase II  6 Contributor address; City; State; Zip Code  Aransas Pass, TX 78336 |