

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Associations, Inc. PAC	13 Filer ID (Ethics Commission Filers) 00067908
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,978.46
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 221,761.86
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 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.

Mr. John Krueger

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 officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - MPAC

17 COMMITTEE NAME Associations, Inc. PAC		18 Filer ID (Ethics Commission Filers) 00067908
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,978.46
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/157 Rpt: 4/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aaro, Cynthia	7 Amount of Contribution (\$) \$2.00
	6 Contributor address; City; State; Zip Code Albuquerque, NM 87112	
8 Principal occupation / Job title (See Instructions) Client Acctng-Spec		9 Employer (See Instructions) Canyon Gate Real Estate Servic
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aaro, Cynthia	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Albuquerque, NM 87112	
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) Canyon Gate Real Estate Servic
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abitia, Sophia	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Dallas, TX 75216	
Principal occupation / Job title (See Instructions) Sales-Mgr		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abitia, Sophia	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Dallas, TX 75216	
Principal occupation / Job title (See Instructions) Sales-Mgr		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Philip	Amount of Contribution (\$) \$9.62
	Contributor address; City; State; Zip Code Charlottesville, VA 22901	
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Community Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/157 Rpt: 5/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Philip <hr/> 6 Contributor address; City; State; Zip Code Charlottesville, VA 22901	7 Amount of Contribution (\$) \$9.62
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Community Group Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akpan, Caleb <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Copywriter		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akpan, Caleb <hr/> Contributor address; City; State; Zip Code Dallas, TX 75248	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Copywriter		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Al-Nazer, Sandra <hr/> Contributor address; City; State; Zip Code Gaithersburg, MD 20878	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-Mgr		Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Al-Nazer, Sandra <hr/> Contributor address; City; State; Zip Code Gaithersburg, MD 20878	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-Mgr		Employer (See Instructions) CMC Virginia

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/157 Rpt: 6/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Algayer, Karen <hr/> 6 Contributor address; City; State; Zip Code Collingswood, NJ 08108	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Algayer, Karen <hr/> Contributor address; City; State; Zip Code Collingswood, NJ 08108	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Keli <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27604	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) H.R.W. INC.
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Keli <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27604	Amount of Contribution (\$) \$3.50
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) H.R.W. INC.
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Tabitha <hr/> Contributor address; City; State; Zip Code Manassas Park, VA 20111	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) CMC Virginia

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/157 Rpt: 7/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Tabitha <hr/> 6 Contributor address; City; State; Zip Code Manassas Park, VA 20111	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) CMC Virginia
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Brett <hr/> Contributor address; City; State; Zip Code Columbus, OH 43229	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) HR-Mgr		Employer (See Instructions) Real Property Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Brett <hr/> Contributor address; City; State; Zip Code Columbus, OH 43229	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) HR-Mgr		Employer (See Instructions) Real Property Management
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aronson, Jon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Finance-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aronson, Jon <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Finance-VP-Sr		Employer (See Instructions) Corporate Headquarters

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/157 Rpt: 8/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrington, Michael <hr/> 6 Contributor address; City; State; Zip Code Surprise, AZ 85378	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Associa Arizona
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arrington, Michael <hr/> Contributor address; City; State; Zip Code Surprise, AZ 85378	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Arizona
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arterbury, James <hr/> Contributor address; City; State; Zip Code Marrietta, GA 30066	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Homeside Properties
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arterbury, James <hr/> Contributor address; City; State; Zip Code Marrietta, GA 30066	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Homeside Properties
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLUM, LINDA <hr/> Contributor address; City; State; Zip Code FREDERICK, MD 21703	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/157 Rpt: 9/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLUM, LINDA	7 Amount of Contribution (\$) \$4.00
6 Contributor address; City; State; Zip Code FREDERICK, MD 21703		
8 Principal occupation / Job title (See Instructions) Community-VP (Branch)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORDEN, JOANN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code White Bear Lake, MN 55110		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Minnesota
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BORDEN, JOANN	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code White Bear Lake, MN 55110		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Minnesota
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, RODNEY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PONTIAC, MI 48340		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Land Arc Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, RODNEY	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code PONTIAC, MI 48340		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Land Arc Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/157 Rpt: 10/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ba, Anna <hr/> 6 Contributor address; City; State; Zip Code Springfield, VA 22150	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Admin-Asst		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bach, Jonathan <hr/> Contributor address; City; State; Zip Code Centreville, VA 20120	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bach, Jonathan <hr/> Contributor address; City; State; Zip Code Centreville, VA 20120	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) CMC Virginia
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baskin, Dmitriy <hr/> Contributor address; City; State; Zip Code Freehold, NJ 07728	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baskin, Dmitriy <hr/> Contributor address; City; State; Zip Code Freehold, NJ 07728	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/157 Rpt: 11/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Teressa <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75013	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Organizational Dev-Mgr		9 Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Teressa <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Organizational Dev-Mgr		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Kathryn <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Houston Community Mgmt Service
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bennett, Kathryn <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Houston Community Mgmt Service
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benvin, Daniel <hr/> Contributor address; City; State; Zip Code Deer Park, TX 77536	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Houston Community Mgmt Service

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/157 Rpt: 12/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benvin, Daniel <hr/> 6 Contributor address; City; State; Zip Code Deer Park, TX 77536	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Dir (Branch)		9 Employer (See Instructions) Houston Community Mgmt Service
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Mark <hr/> Contributor address; City; State; Zip Code Miami, FL 33137	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Marquis
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackburn, Mark <hr/> Contributor address; City; State; Zip Code Miami, FL 33137	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Marquis
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomer, Lisa <hr/> Contributor address; City; State; Zip Code Alexandria, KY 41001	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Onsite Manager		Employer (See Instructions) Community Management Solutions
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomer, Lisa <hr/> Contributor address; City; State; Zip Code Alexandria, KY 41001	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Onsite Manager		Employer (See Instructions) Community Management Solutions

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/157 Rpt: 13/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boeck, Michelle <hr/> 6 Contributor address; City; State; Zip Code North Branch, MN 55056	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) HR-Mgr (Regional)		9 Employer (See Instructions) Cities Management Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boeck, Michelle <hr/> Contributor address; City; State; Zip Code North Branch, MN 55056	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) HR-Mgr (Regional)		Employer (See Instructions) Cities Management Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boesen, Paige <hr/> Contributor address; City; State; Zip Code Sparks, NV 89431	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Sierra North
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boesen, Paige <hr/> Contributor address; City; State; Zip Code Sparks, NV 89431	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Sierra North
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borek, Sara <hr/> Contributor address; City; State; Zip Code Escondido, CA 92026	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) The Prescott Companies Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/157 Rpt: 14/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borek, Sara <hr/> 6 Contributor address; City; State; Zip Code Escondido, CA 92026	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) The Prescott Companies Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyles III, Robert <hr/> Contributor address; City; State; Zip Code Bordentown, NJ 08505	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) CMC NJ
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyles III, Robert <hr/> Contributor address; City; State; Zip Code Bordentown, NJ 08505	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) CMC NJ
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bramlett, Matthew <hr/> Contributor address; City; State; Zip Code Henderson, CO 80640	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Associa Colorado
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Robyn <hr/> Contributor address; City; State; Zip Code Millbrook, IL 60536	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Chicagoland

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/157 Rpt: 15/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Robyn <hr/> 6 Contributor address; City; State; Zip Code Millbrook, IL 60536	7 Amount of Contribution (\$) \$11.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Associa Chicagoland
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brensinger, Patrick <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brensinger, Patrick <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bricker, Shelly <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92255	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bricker, Shelly <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92255	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/157 Rpt: 16/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, P.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Reston, VA 20191	
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, P.	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Reston, VA 20191	
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) CMC Virginia
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, John	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions) CIO		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, John	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions) CIO		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brokaw, Heather	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Lehigh Acres, FL 33974	
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Gulf Coast Inc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/157 Rpt: 17/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brokaw, Heather <hr/> 6 Contributor address; City; State; Zip Code Lehigh Acres, FL 33974	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Associa Gulf Coast Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Arthur <hr/> Contributor address; City; State; Zip Code Alpharetta, GA 30022	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Homeside Properties
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Arthur <hr/> Contributor address; City; State; Zip Code Alpharetta, GA 30022	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Homeside Properties
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buha, Colleen <hr/> Contributor address; City; State; Zip Code Waterford, MI 48329	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Kramer Triad Management Group
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buha, Colleen <hr/> Contributor address; City; State; Zip Code Waterford, MI 48329	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Kramer Triad Management Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/157 Rpt: 18/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bupp, Derek <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11215	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Property Manager		9 Employer (See Instructions) Choice NY Property Management
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bupp, Derek <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11215	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Julie <hr/> Contributor address; City; State; Zip Code Riva, MD 21140	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Michelle <hr/> Contributor address; City; State; Zip Code Warminster, PA 18974	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Mid Atlantic Management Corp
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Michelle <hr/> Contributor address; City; State; Zip Code Warminster, PA 18974	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Mid Atlantic Management Corp

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/157 Rpt: 19/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnside, Michelle	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Mabank, TX 75147		
8 Principal occupation / Job title (See Instructions) HR-VP		9 Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnside, Michelle	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Mabank, TX 75147		
Principal occupation / Job title (See Instructions) HR-VP		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Joseph	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Dallas, TX 75243		
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Joseph	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Dallas, TX 75243		
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrd, Annette	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Ruskin, FL 33573		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Gulf Coast Inc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/157 Rpt: 20/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrd, Annette <hr/> 6 Contributor address; City; State; Zip Code Ruskin, FL 33573	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Associa Gulf Coast Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, BYRON <hr/> Contributor address; City; State; Zip Code PASADINA, MD 21122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, BYRON <hr/> Contributor address; City; State; Zip Code PASADINA, MD 21122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAU, MY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Acctant-Sr (III)		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHAU, MY <hr/> Contributor address; City; State; Zip Code GARLAND, TX 75044	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Acctant-Sr (III)		Employer (See Instructions) CSSC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/157 Rpt: 21/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, DEREK	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Marco Island, FL 34145	
8 Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		9 Employer (See Instructions) Sandcastle Management LLC
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COX, DEREK	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Marco Island, FL 34145	
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Sandcastle Management LLC
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Walter	Amount of Contribution (\$) \$9.00
	Contributor address; City; State; Zip Code Virginia Beach, VA 23451	
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Walter	Amount of Contribution (\$) \$9.00
	Contributor address; City; State; Zip Code Virginia Beach, VA 23451	
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Community Group Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carey, Clinton	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Lauderhill, FL 33311	
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Marquis

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/157 Rpt: 22/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carey, Clinton	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Lauderhill, FL 33311	
8 Principal occupation / Job title (See Instructions) Community-Dir (Branch)		9 Employer (See Instructions) Marquis
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Ellen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Kailua, HI 96734	
Principal occupation / Job title (See Instructions) Acctng-Mgr (Branch)		Employer (See Instructions) Associa Hawaii
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Ellen	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Kailua, HI 96734	
Principal occupation / Job title (See Instructions) Acctng-Mgr (Branch)		Employer (See Instructions) Associa Hawaii
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carona, Jeffrey	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Dallas, TX 75229	
Principal occupation / Job title (See Instructions) Project Mgmt-Mgr		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carona, Jeffrey	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Dallas, TX 75229	
Principal occupation / Job title (See Instructions) Project Mgmt-Mgr		Employer (See Instructions) Corporate Headquarters

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/157 Rpt: 23/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carona, John <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75360	7 Amount of Contribution (\$) \$190.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carona, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75360	Amount of Contribution (\$) \$190.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Tiffany <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Houston Community Mgmt Service
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Tiffany <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Houston Community Mgmt Service
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Case, Connor <hr/> Contributor address; City; State; Zip Code Waco, TX 76712	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Corporate Headquarters

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/157 Rpt: 24/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Case, Connor <hr/> 6 Contributor address; City; State; Zip Code Waco, TX 76712	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		9 Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassidy, Darrin <hr/> Contributor address; City; State; Zip Code Round Hill, VA 20141	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) CMC Virginia
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Brian <hr/> Contributor address; City; State; Zip Code King of Prussia, PA 19406	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Mid Atlantic Management Corp
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Brian <hr/> Contributor address; City; State; Zip Code King of Prussia, PA 19406	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Mid Atlantic Management Corp
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Donna <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87120	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Canyon Gate Real Estate Servic

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/157 Rpt: 25/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chavez, Donna	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Albuquerque, NM 87120		
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) Canyon Gate Real Estate Servic
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chilcote, Patricia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Linden, VA 22642		
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chilcote, Patricia	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Linden, VA 22642		
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) CMC Virginia
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chounramany, Vannouvong	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Springfield, VA 22151		
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chounramany, Vannouvong	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Springfield, VA 22151		
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) CMC Virginia

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/157 Rpt: 26/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cicogna, Leslee	7 Amount of Contribution (\$) \$6.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78259		
8 Principal occupation / Job title (See Instructions) Trainer		9 Employer (See Instructions) Associa Hill Country
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cicogna, Leslee	Amount of Contribution (\$) \$6.00
Contributor address; City; State; Zip Code San Antonio, TX 78259		
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) Associa Hill Country
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Allison	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Wylie, TX 75098		
Principal occupation / Job title (See Instructions) Marketing-Specialist		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Allison	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Wylie, TX 75098		
Principal occupation / Job title (See Instructions) Marketing-Specialist		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Sasha	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code Fowlerville, MI 48836		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Land Arc Inc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/157 Rpt: 27/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Sasha <hr/> 6 Contributor address; City; State; Zip Code Fowlerville, MI 48836	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Land Arc Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clausen, Sarah <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Communications-Dir		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clausen, Sarah <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Communications-Dir		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobbs, Vandon <hr/> Contributor address; City; State; Zip Code Montpelier, VA 23192	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobbs, Vandon <hr/> Contributor address; City; State; Zip Code Montpelier, VA 23192	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Community Group Inc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/157 Rpt: 28/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Norma <hr/> 6 Contributor address; City; State; Zip Code Sugar Hill, GA 30518	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Homeside Properties
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Norma <hr/> Contributor address; City; State; Zip Code Sugar Hill, GA 30518	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Homeside Properties
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Paula <hr/> Contributor address; City; State; Zip Code Panama City, FL 32405	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Burg Management Co Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Paula <hr/> Contributor address; City; State; Zip Code Panama City, FL 32405	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Burg Management Co Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corcoran, Kim <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87110	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) OPS-Dir-Corporate Dev		Employer (See Instructions) Canyon Gate Real Estate Servic

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/157 Rpt: 29/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corcoran, Kim	7 Amount of Contribution (\$) \$36.00
6 Contributor address; City; State; Zip Code Albuquerque, NM 87110		
8 Principal occupation / Job title (See Instructions) OPS-Dir-Corporate Dev		9 Employer (See Instructions) Canyon Gate Real Estate Servic
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crenshaw, Elias	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code San Diego, CA 92120		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) N N Jaeschke Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crenshaw, Elias	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code San Diego, CA 92120		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) N N Jaeschke Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crosby II, Carnell	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Royal Oak, MI 48073		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Kramer Triad Management Group
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crosby II, Carnell	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Royal Oak, MI 48073		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Kramer Triad Management Group

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/157 Rpt: 30/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouse, Karen <hr/> 6 Contributor address; City; State; Zip Code Waterford, MI 48328	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) Kramer Triad Management Group
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crouse, Karen <hr/> Contributor address; City; State; Zip Code Waterford, MI 48328	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Kramer Triad Management Group
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Christie <hr/> Contributor address; City; State; Zip Code Desert Hot Springs, CA 92240	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Christie <hr/> Contributor address; City; State; Zip Code Desert Hot Springs, CA 92240	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cvach, Joseph <hr/> Contributor address; City; State; Zip Code Clearwater, FL 33755	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Gulf Coast Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/157 Rpt: 31/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cvach, Joseph <hr/> 6 Contributor address; City; State; Zip Code Clearwater, FL 33755	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Associa Gulf Coast Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Ambruoso, Barbara <hr/> Contributor address; City; State; Zip Code Canton, GA 30115	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Homeside Properties
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Ambruoso, Barbara <hr/> Contributor address; City; State; Zip Code Canton, GA 30115	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Homeside Properties
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Souza, Tessa <hr/> Contributor address; City; State; Zip Code Fallbrook, CA 92028	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) HR-Mgr		Employer (See Instructions) N N Jaeschke Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Souza, Tessa <hr/> Contributor address; City; State; Zip Code Fallbrook, CA 92028	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) HR-Mgr		Employer (See Instructions) N N Jaeschke Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/157 Rpt: 32/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, ANNA	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Brooklyn Park, MN 55428	
8 Principal occupation / Job title (See Instructions) Community-VP (Branch)		9 Employer (See Instructions) Associa Minnesota
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, ANNA	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Brooklyn Park, MN 55428	
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Associa Minnesota
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dahl, Dianne	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Port Charlotte, FL 33954	
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Gulf Coast Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dahl, Dianne	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Port Charlotte, FL 33954	
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Gulf Coast Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dahlberg, Melinda	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Cambridge, MN 55008	
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Cities Management Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/157 Rpt: 33/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dahlberg, Melinda	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Cambridge, MN 55008		
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Cities Management Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Joshlyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Oak Point, TX 75068		
Principal occupation / Job title (See Instructions) Implem-VP		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Joshlyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Oak Point, TX 75068		
Principal occupation / Job title (See Instructions) Implem-VP		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danys, Dorian	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Sarasota, FL 34238		
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) Associa Gulf Coast Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danys, Dorian	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Sarasota, FL 34238		
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) Associa Gulf Coast Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/157 Rpt: 34/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De La Rosa, Andrew	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Hialeah, FL 33014	
8 Principal occupation / Job title (See Instructions) Cust Serv-Mgr		9 Employer (See Instructions) Association Services of Florid
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De La Rosa, Andrew	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Hialeah, FL 33014	
Principal occupation / Job title (See Instructions) Cust Serv-Mgr		Employer (See Instructions) Association Services of Florid
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeLeon, Patricia	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Carrollton, TX 75010	
Principal occupation / Job title (See Instructions) Acctng-Mgr-Sr		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeLeon, Patricia	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Carrollton, TX 75010	
Principal occupation / Job title (See Instructions) Acctng-Mgr-Sr		Employer (See Instructions) CSSC
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dees, Cortney	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Virginia Beach, VA 23453	
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Community Group Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/157 Rpt: 35/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dees, Cortney	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Virginia Beach, VA 23453		
8 Principal occupation / Job title (See Instructions) Community-Dir (Branch)		9 Employer (See Instructions) Community Group Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dehn, Jeanine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Haymarket, VA 20169		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dehn, Jeanine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Haymarket, VA 20169		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) CMC Virginia
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delgado, Alicia	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Elgin, IL 60124		
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Chicagoland
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delgado, Alicia	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Elgin, IL 60124		
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Chicagoland

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/157 Rpt: 36/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dessaints, Tiffany	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Springtown, TX 76082		
8 Principal occupation / Job title (See Instructions) Ops-VP-Sr		9 Employer (See Instructions) PMG North Texas
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dessaints, Tiffany	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Springtown, TX 76082		
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) PMG North Texas
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Detar, Rachael	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code St. Clair Shores, MI 48081		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Kramer Triad Management Group
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Detar, Rachael	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code St. Clair Shores, MI 48081		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Kramer Triad Management Group
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Elaine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Nashua, NH 03062		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Evergreen Harvard Group LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/157 Rpt: 37/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Devlin, Elaine <hr/> 6 Contributor address; City; State; Zip Code Nashua, NH 03062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Evergreen Harvard Group LLC
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodge, Jamie <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodge, Jamie <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodge, Mark <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodge, Mark <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) Desert Resort Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/157 Rpt: 38/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodson, Clint	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Crowley, TX 76036		
8 Principal occupation / Job title (See Instructions) IT-Helpdesk-Lead		9 Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodson, Clint	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Crowley, TX 76036		
Principal occupation / Job title (See Instructions) IT-Helpdesk-Lead		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donovan, Drew	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Westfield, NJ 07090		
Principal occupation / Job title (See Instructions) COO and Sr Property Manager		Employer (See Instructions) Choice NY Property Management
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downs, Tracy	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code Laporte, TX 77571		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Houston Community Mgmt Service
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downs, Tracy	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code Laporte, TX 77571		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Houston Community Mgmt Service

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/157 Rpt: 39/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draghici, Mihaela	7 Amount of Contribution (\$) \$0.25
6 Contributor address; City; State; Zip Code Fairfax, VA 22030		
8 Principal occupation / Job title (See Instructions) Acctant-Sr (III)		9 Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draghici, Mihaela	Amount of Contribution (\$) \$0.25
Contributor address; City; State; Zip Code Fairfax, VA 22030		
Principal occupation / Job title (See Instructions) Acctant-Sr (III)		Employer (See Instructions) CMC Virginia
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Tara	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Largo, FL 33773		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Gulf Coast Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Tara	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Largo, FL 33773		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Gulf Coast Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprey, Ronald	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code Hutchinson Island, FL 34949		
Principal occupation / Job title (See Instructions) Intg Svcs-VP		Employer (See Instructions) CMP Orlando

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/157 Rpt: 40/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprey, Ronald <hr/> 6 Contributor address; City; State; Zip Code Hutchinson Island, FL 34949	7 Amount of Contribution (\$) \$52.00
8 Principal occupation / Job title (See Instructions) Intg Svcs-VP		9 Employer (See Instructions) CMP Orlando
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durbin, Kenneth <hr/> Contributor address; City; State; Zip Code Glen Allen, VA 23060	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durbin, Kenneth <hr/> Contributor address; City; State; Zip Code Glen Allen, VA 23060	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Community Group Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberius, Mathew <hr/> Contributor address; City; State; Zip Code CLEARWATER, FL 33761	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) Associa Gulf Coast Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberius, Mathew <hr/> Contributor address; City; State; Zip Code CLEARWATER, FL 33761	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) Associa Gulf Coast Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/157 Rpt: 41/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddy, Andrea <hr/> 6 Contributor address; City; State; Zip Code Hilton Head Island, SC 29926	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Atlantic States Management
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddy, Andrea <hr/> Contributor address; City; State; Zip Code Hilton Head Island, SC 29926	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Atlantic States Management
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eden Carona, Helen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) CCO-Chief Corporate Officer		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eden Carona, Helen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) CCO-Chief Corporate Officer		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emery, Richard <hr/> Contributor address; City; State; Zip Code Honolulu, HI 96816	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Govmt Affairs-VP		Employer (See Instructions) Associa Hawaii

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/157 Rpt: 42/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emery, Richard <hr/> 6 Contributor address; City; State; Zip Code Honolulu, HI 96816	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Govmt Affairs-VP		9 Employer (See Instructions) Associa Hawaii
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Encabo, Miguel Liam <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Encabo, Miguel Liam <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) CSSC
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enriquez, Maria <hr/> Contributor address; City; State; Zip Code La Quinta, CA 92253	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enriquez, Maria <hr/> Contributor address; City; State; Zip Code La Quinta, CA 92253	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Desert Resort Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/157 Rpt: 43/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Entwistle, Janine <hr/> 6 Contributor address; City; State; Zip Code Pawleys Island, SC 29585	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) General Manager		9 Employer (See Instructions) CAMS
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Entwistle, Janine <hr/> Contributor address; City; State; Zip Code Pawleys Island, SC 29585	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) CAMS
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULKES, LORIE <hr/> Contributor address; City; State; Zip Code WINTER PARK, FL 32792	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Hara Community
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULKES, LORIE <hr/> Contributor address; City; State; Zip Code WINTER PARK, FL 32792	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Hara Community
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon-Heneghan, Gina <hr/> Contributor address; City; State; Zip Code Oceanside, CA 92057	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) N N Jaeschke Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/157 Rpt: 44/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon-Heneghan, Gina <hr/> 6 Contributor address; City; State; Zip Code Oceanside, CA 92057	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) N N Jaeschke Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farkas, Greg <hr/> Contributor address; City; State; Zip Code Hurst, TX 76054	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) PMG North Texas
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farkas, Greg <hr/> Contributor address; City; State; Zip Code Hurst, TX 76054	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) PMG North Texas
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fazekas, Joseph <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Maint-Tech		Employer (See Instructions) Associa Hill Country
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fazekas, Joseph <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Maint-Tech		Employer (See Instructions) Associa Hill Country

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/157 Rpt: 45/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fazekas, Shawn	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Rockwall, TX 75087		
8 Principal occupation / Job title (See Instructions) Ops-VP (Regional)		9 Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fazekas, Shawn	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Rockwall, TX 75087		
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) CSSC
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feldman, Michael	Amount of Contribution (\$) \$38.46
Contributor address; City; State; Zip Code Warren, NJ 07059		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Choice NY Property Management
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felicione, Geraldine	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Toms River, NJ 08755		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felicione, Geraldine	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Toms River, NJ 08755		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) MAMCO - Mid Atlantic

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/157 Rpt: 46/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fewell, Caren <hr/> 6 Contributor address; City; State; Zip Code Portland, OR 97229	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Blue Mountain Community Mgmt L
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fewell, Caren <hr/> Contributor address; City; State; Zip Code Portland, OR 97229	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Blue Mountain Community Mgmt L
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fish, Stuart <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11209	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fish, Stuart <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11209	Amount of Contribution (\$) \$7.50
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Erica <hr/> Contributor address; City; State; Zip Code Dundalk, MD 21222	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) CMC Virginia

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/157 Rpt: 47/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Erica <hr/> 6 Contributor address; City; State; Zip Code Dundalk, MD 21222	7 Amount of Contribution (\$) \$13.00
8 Principal occupation / Job title (See Instructions) General Mgr (II)		9 Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flinchum, Adam <hr/> Contributor address; City; State; Zip Code Arlington, VA 22203	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) General Mgr-Asst		Employer (See Instructions) CMC Virginia
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foell, Kathryn <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) IT-Adminstr-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foell, Kathryn <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$9.62
Principal occupation / Job title (See Instructions) IT-Adminstr-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortin, Andrew <hr/> Contributor address; City; State; Zip Code Fort Meade, FL 33841	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Govmt Affairs-VP-Sr		Employer (See Instructions) Corporate Headquarters

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/157 Rpt: 48/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortin, Andrew <hr/> 6 Contributor address; City; State; Zip Code Fort Meade, FL 33841	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Govmt Affairs-VP-Sr		9 Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Jeff <hr/> Contributor address; City; State; Zip Code Arlington, TX 76001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Mgmt-Dir		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Jeff <hr/> Contributor address; City; State; Zip Code Arlington, TX 76001	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Mgmt-Dir		Employer (See Instructions) Corporate Headquarters
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frangiosa, Theresa <hr/> Contributor address; City; State; Zip Code Jeffersonville, PA 19403	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Mid Atlantic Management Corp
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frieling, Angela <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Chief Mrkting Officer		Employer (See Instructions) Corporate Headquarters

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/157 Rpt: 49/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frieling, Angela <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Chief Mrkting Officer		9 Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Matthew <hr/> Contributor address; City; State; Zip Code Madison Heights, MI 48071	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Code Enforc-Assc		Employer (See Instructions) Kramer Triad Management Group
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Matthew <hr/> Contributor address; City; State; Zip Code Madison Heights, MI 48071	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Code Enforc-Assc		Employer (See Instructions) Kramer Triad Management Group
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUNN, RUTH <hr/> Contributor address; City; State; Zip Code FAIRFAX, VA 22031	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUNN, RUTH <hr/> Contributor address; City; State; Zip Code FAIRFAX, VA 22031	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Legum & Norman Realty Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/157 Rpt: 50/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galambos, Theresa	7 Amount of Contribution (\$) \$4.00
6 Contributor address; City; State; Zip Code Sterling, VA 20164		
8 Principal occupation / Job title (See Instructions) Acctng-Dir (Branch)		9 Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galambos, Theresa	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Sterling, VA 20164		
Principal occupation / Job title (See Instructions) Acctng-Dir (Branch)		Employer (See Instructions) CMC Virginia
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamiz, Jennifer	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Marketing-Dir-Sr		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamiz, Jennifer	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Mansfield, TX 76063		
Principal occupation / Job title (See Instructions) Marketing-Dir-Sr		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Rebecca	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Palm Desert, CA 92260		
Principal occupation / Job title (See Instructions) Community-Mgr-Asst		Employer (See Instructions) Desert Resort Management

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/157 Rpt: 51/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Palm Desert, CA 92260	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr-Asst		9 Employer (See Instructions) Desert Resort Management
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Jose <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Jose <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) CSSC
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Kara <hr/> Contributor address; City; State; Zip Code Edmond, OK 73013	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Neighborhood Services Corp
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Kara <hr/> Contributor address; City; State; Zip Code Edmond, OK 73013	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Neighborhood Services Corp

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/157 Rpt: 52/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Lori <hr/> 6 Contributor address; City; State; Zip Code Saline, MI 48176	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Client Acctng-Spec		9 Employer (See Instructions) Kramer Triad Management Group
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Lori <hr/> Contributor address; City; State; Zip Code Saline, MI 48176	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) Kramer Triad Management Group
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillman, Andrew <hr/> Contributor address; City; State; Zip Code Miami, FL 33138	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Marquis
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillman, Andrew <hr/> Contributor address; City; State; Zip Code Miami, FL 33138	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Marquis
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gjeloshaj, Albert <hr/> Contributor address; City; State; Zip Code Bloomfield hills, MI 48304	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Kramer Triad Management Group

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/157 Rpt: 53/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gjeloshaj, Albert <hr/> 6 Contributor address; City; State; Zip Code Bloomfield hills, MI 48304	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Kramer Triad Management Group
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goffin, Stacy <hr/> Contributor address; City; State; Zip Code Waldorf, MD 20603	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr-Asst		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goffin, Stacy <hr/> Contributor address; City; State; Zip Code Waldorf, MD 20603	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr-Asst		Employer (See Instructions) Legum & Norman Realty Inc.
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Zachary <hr/> Contributor address; City; State; Zip Code Hawkins, TX 75765	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) IT-Syss-Eng		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Zachary <hr/> Contributor address; City; State; Zip Code Hawkins, TX 75765	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) IT-Syss-Eng		Employer (See Instructions) Corporate Headquarters

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/157 Rpt: 54/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graf, Selina <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78259	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr-Asst		9 Employer (See Instructions) Associa Hill Country
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graf, Selina <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr-Asst		Employer (See Instructions) Associa Hill Country
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granozio, Joanne <hr/> Contributor address; City; State; Zip Code Cherry Hill, NJ 08002	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granozio, Joanne <hr/> Contributor address; City; State; Zip Code Cherry Hill, NJ 08002	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) MAMCO - Mid Atlantic
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant, Jennifer <hr/> Contributor address; City; State; Zip Code Ewa Beach, HI 96706	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Associa Hawaii

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/157 Rpt: 55/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant, Jennifer	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Ewa Beach, HI 96706		
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Associa Hawaii
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenwood, Lee	Amount of Contribution (\$) \$48.00
Contributor address; City; State; Zip Code Boston, MA 02124		
Principal occupation / Job title (See Instructions) Govmt Affairs-VP		Employer (See Instructions) Evergreen Harvard Group LLC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenwood, Lee	Amount of Contribution (\$) \$48.00
Contributor address; City; State; Zip Code Boston, MA 02124		
Principal occupation / Job title (See Instructions) Govmt Affairs-VP		Employer (See Instructions) Evergreen Harvard Group LLC
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Dawn	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Chicago, IL 60640		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Chicagoland
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Dawn	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Chicago, IL 60640		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Chicagoland

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/157 Rpt: 56/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Crystal <hr/> 6 Contributor address; City; State; Zip Code Columbia, TN 38401	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Onsite Manager		9 Employer (See Instructions) Associa Tennessee
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Crystal <hr/> Contributor address; City; State; Zip Code Columbia, TN 38401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Onsite Manager		Employer (See Instructions) Associa Tennessee
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griggs, Colleen <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32224	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) CMC Jacksonville
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griggs, Colleen <hr/> Contributor address; City; State; Zip Code Jacksonville, FL 32224	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) CMC Jacksonville
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grissom, Lisa <hr/> Contributor address; City; State; Zip Code Reston, VA 20194	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Cust Serv-Assc (I)		Employer (See Instructions) CMC Virginia

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/157 Rpt: 57/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grissom, Lisa <hr/> 6 Contributor address; City; State; Zip Code Reston, VA 20194	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Cust Serv-Assc (I)		9 Employer (See Instructions) CMC Virginia
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Vivian <hr/> Contributor address; City; State; Zip Code Dallas, TX 75227	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Vivian <hr/> Contributor address; City; State; Zip Code Dallas, TX 75227	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAIRE-WILLIAMS, JESSICA <hr/> Contributor address; City; State; Zip Code TEMECULA, CA 92592	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) The Prescott Companies Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAIRE-WILLIAMS, JESSICA <hr/> Contributor address; City; State; Zip Code TEMECULA, CA 92592	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) The Prescott Companies Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/157 Rpt: 58/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hames, James <hr/> 6 Contributor address; City; State; Zip Code Upper Marlboro, MD 20772	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hames, James <hr/> Contributor address; City; State; Zip Code Upper Marlboro, MD 20772	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) CMC Virginia
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Happ, Roberta <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92211	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Happ, Roberta <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92211	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmon, Lynn <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sales-Dir (Regional)		Employer (See Instructions) Associa Hill Country

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/157 Rpt: 59/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmon, Lynn <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78247	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Sales-Dir (Regional)		9 Employer (See Instructions) Associa Hill Country
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Jenniffer <hr/> Contributor address; City; State; Zip Code Southampton, NJ 08088	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) Sales-Mgr		Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Jenniffer <hr/> Contributor address; City; State; Zip Code Southampton, NJ 08088	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) Sales-Mgr		Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Ty <hr/> Contributor address; City; State; Zip Code Washington, DC 20009	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Client Relat-Dir (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartmann, Lynne <hr/> Contributor address; City; State; Zip Code Runnemedede, NJ 08078	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) MAMCO - Mid Atlantic

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/157 Rpt: 60/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartmann, Lynne <hr/> 6 Contributor address; City; State; Zip Code Runnemede, NJ 08078	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hastings, Nancy <hr/> Contributor address; City; State; Zip Code Barnegat, NJ 08005	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hastings, Nancy <hr/> Contributor address; City; State; Zip Code Barnegat, NJ 08005	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hastings III, Robert <hr/> Contributor address; City; State; Zip Code Barnegat, NJ 08005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Field Serv-Dir (Regional)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hastings III, Robert <hr/> Contributor address; City; State; Zip Code Barnegat, NJ 08005	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Field Serv-Dir (Regional)		Employer (See Instructions) MAMCO - Mid Atlantic

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/157 Rpt: 61/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hattier, Faith <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75075	7 Amount of Contribution (\$) <div style="text-align: right;">\$15.00</div>
8 Principal occupation / Job title (See Instructions) Project Mgmt-VP		9 Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hattier, Faith <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) <div style="text-align: right;">\$15.00</div>
Principal occupation / Job title (See Instructions) Project Mgmt-VP		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heinecke, Jesse <hr/> Contributor address; City; State; Zip Code New Richmond, WI 54017	Amount of Contribution (\$) <div style="text-align: right;">\$4.00</div>
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Cities Management Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heinecke, Jesse <hr/> Contributor address; City; State; Zip Code New Richmond, WI 54017	Amount of Contribution (\$) <div style="text-align: right;">\$4.00</div>
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Cities Management Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Jennifer <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219	Amount of Contribution (\$) <div style="text-align: right;">\$5.00</div>
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Somerset Association Managemen

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/157 Rpt: 62/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) General Mgr (I)		9 Employer (See Instructions) Somerset Association Managemen
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennessy, Joann <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19154	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Mid Atlantic Management Corp
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennessy, Joann <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19154	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Mid Atlantic Management Corp
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henrici, Sarah <hr/> Contributor address; City; State; Zip Code Edmond, OK 73013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Neighborhood Services Corp
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henrici, Sarah <hr/> Contributor address; City; State; Zip Code Edmond, OK 73013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Neighborhood Services Corp

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/157 Rpt: 63/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensley, John <hr/> 6 Contributor address; City; State; Zip Code Franklin, KY 42134	7 Amount of Contribution (\$) \$11.00
8 Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		9 Employer (See Instructions) Associa Tennessee
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensley, John <hr/> Contributor address; City; State; Zip Code Franklin, KY 42134	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Associa Tennessee
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermogenes, Ma Carcel <hr/> Contributor address; City; State; Zip Code Springfield, VA 22151	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermogenes, Ma Carcel <hr/> Contributor address; City; State; Zip Code Springfield, VA 22151	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) CMC Virginia
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Michelle <hr/> Contributor address; City; State; Zip Code Belleville, NJ 07109	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Rec-Dir		Employer (See Instructions) CMC NJ

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/157 Rpt: 64/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Michelle	7 Amount of Contribution (\$) \$4.00
6 Contributor address; City; State; Zip Code Belleville, NJ 07109		
8 Principal occupation / Job title (See Instructions) Rec-Dir		9 Employer (See Instructions) CMC NJ
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herring Jr., James	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Richmond, VA 23233		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herring Jr., James	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Richmond, VA 23233		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Community Group Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hertzler, Rebecca	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Rock Hill, SC 29730		
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) Associa Carolinas
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hertzler, Rebecca	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Rock Hill, SC 29730		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Carolinas

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/157 Rpt: 65/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Robin <hr/> 6 Contributor address; City; State; Zip Code Richmond, VA 23228	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Admin-Asst		9 Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Robin <hr/> Contributor address; City; State; Zip Code Richmond, VA 23228	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Community Group Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillen, Coleen <hr/> Contributor address; City; State; Zip Code Midlothian, VA 23113	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillen, Coleen <hr/> Contributor address; City; State; Zip Code Midlothian, VA 23113	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Community Group Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilliard, Matthew <hr/> Contributor address; City; State; Zip Code Cumming, GA 30041	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Homeside Properties

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/157 Rpt: 66/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilliard, Matthew <hr/> 6 Contributor address; City; State; Zip Code Cumming, GA 30041	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		9 Employer (See Instructions) Homeside Properties
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoang, Phung <hr/> Contributor address; City; State; Zip Code Murrieta, CA 92563	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) The Prescott Companies Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoang, Phung <hr/> Contributor address; City; State; Zip Code Murrieta, CA 92563	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) The Prescott Companies Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hohl, Matthew <hr/> Contributor address; City; State; Zip Code Chicago, IL 60643	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Field Serv-Dir (Regional)		Employer (See Instructions) Associa Chicagoland
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hohl, Matthew <hr/> Contributor address; City; State; Zip Code Chicago, IL 60643	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Field Serv-Dir (Regional)		Employer (See Instructions) Associa Chicagoland

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/157 Rpt: 67/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holguin, Sellah	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Albuquerque, NM 87121		
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Canyon Gate Real Estate Servic
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holguin, Sellah	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Albuquerque, NM 87121		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Canyon Gate Real Estate Servic
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, April	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Newport News, VA 23608		
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, April	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Newport News, VA 23608		
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Community Group Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins Mendes, Dana	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code San Diego, CA 92109		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) N N Jaeschke Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/157 Rpt: 68/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins Mendes, Dana <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92109	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) N N Jaeschke Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horndasch, Erica <hr/> Contributor address; City; State; Zip Code Wauconda, IL 60084	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Chicagoland
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horndasch, Erica <hr/> Contributor address; City; State; Zip Code Wauconda, IL 60084	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Chicagoland
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hourscht, Jennifer <hr/> Contributor address; City; State; Zip Code Marana, AZ 85653	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Arizona
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hourscht, Jennifer <hr/> Contributor address; City; State; Zip Code Marana, AZ 85653	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Arizona

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/157 Rpt: 69/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Housel, Pam <hr/> 6 Contributor address; City; State; Zip Code Glen Allen, VA 23060	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Admin-Asst		9 Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Housel, Pam <hr/> Contributor address; City; State; Zip Code Glen Allen, VA 23060	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Community Group Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Scott <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95822	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Northern California
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Scott <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95822	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Northern California
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Melanie <hr/> Contributor address; City; State; Zip Code Hendersonville, NC 28739	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) IPM Corp of Brevard Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/157 Rpt: 70/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Melanie <hr/> 6 Contributor address; City; State; Zip Code Hendersonville, NC 28739	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) IPM Corp of Brevard Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Bryan <hr/> Contributor address; City; State; Zip Code Bountiful, UT 84010	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Bryan <hr/> Contributor address; City; State; Zip Code Bountiful, UT 84010	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter, Jon <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter, Jon <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) Corporate Headquarters

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/157 Rpt: 71/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybner, Sandra <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78259	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Associa Hill Country
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hybner, Sandra <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Hill Country
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ikard, Robert <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73112	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Neighborhood Services Corp
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ikard, Robert <hr/> Contributor address; City; State; Zip Code Oklahoma City, OK 73112	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Neighborhood Services Corp
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janero, Belkis <hr/> Contributor address; City; State; Zip Code Pembroke Pines, FL 33029	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Admin-Office-Receptionist		Employer (See Instructions) Association Services of Florid

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/157 Rpt: 72/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janero, Belkis	7 Amount of Contribution (\$) \$7.00
6 Contributor address; City; State; Zip Code Pembroke Pines, FL 33029		
8 Principal occupation / Job title (See Instructions) Admin-Office-Receptionist		9 Employer (See Instructions) Association Services of Florid
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jennifer	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Marlton, NJ 08053		
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jennifer	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Marlton, NJ 08053		
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code White, GA 30184		
Principal occupation / Job title (See Instructions) Acctng-Spec (II)		Employer (See Instructions) Homeside Properties
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code White, GA 30184		
Principal occupation / Job title (See Instructions) Acctng-Spec (II)		Employer (See Instructions) Homeside Properties

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/157 Rpt: 73/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Deborah	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Somerville, MA 02144	
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Dartmouth
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Deborah	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Somerville, MA 02144	
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Dartmouth
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Janel	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Ft. Worth, TX 76112	
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) PMG North Texas
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Janel	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Ft. Worth, TX 76112	
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) PMG North Texas
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Kelli	Amount of Contribution (\$) \$0.50
	Contributor address; City; State; Zip Code BOISE, ID 83716	
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Associations Equity

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/157 Rpt: 74/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Kelli <hr/> 6 Contributor address; City; State; Zip Code BOISE, ID 83716	7 Amount of Contribution (\$) \$0.50
8 Principal occupation / Job title (See Instructions) Community-Dir (Branch)		9 Employer (See Instructions) Associations Equity
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Marla <hr/> Contributor address; City; State; Zip Code Holland, PA 18966	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Ops-Analyst-Sr		Employer (See Instructions) Mid Atlantic Management Corp
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Marla <hr/> Contributor address; City; State; Zip Code Holland, PA 18966	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Ops-Analyst-Sr		Employer (See Instructions) Mid Atlantic Management Corp
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Robert <hr/> Contributor address; City; State; Zip Code Ferdericksburg, VA 22401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Maint-Tech		Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Robert <hr/> Contributor address; City; State; Zip Code Ferdericksburg, VA 22401	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Maint-Tech		Employer (See Instructions) CMC Virginia

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/157 Rpt: 75/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kehayias, Sofia <hr/> 6 Contributor address; City; State; Zip Code Falls Church, VA 22042	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) CMC Virginia
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Marlo <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Somerset Association Managemen
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Marlo <hr/> Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Somerset Association Managemen
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Keanon <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Keanon <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) CSSC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/157 Rpt: 76/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Robert <hr/> 6 Contributor address; City; State; Zip Code Santee, CA 92071	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Community-VP (Branch)		9 Employer (See Instructions) The Prescott Companies Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Robert <hr/> Contributor address; City; State; Zip Code Santee, CA 92071	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) The Prescott Companies Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerwin, Heather <hr/> Contributor address; City; State; Zip Code Ft. Collins, CO 80521	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) Associa Colorado
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerwin, Heather <hr/> Contributor address; City; State; Zip Code Ft. Collins, CO 80521	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) Associa Colorado
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ketcham, Timothy <hr/> Contributor address; City; State; Zip Code Fruitland, MD 21826	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Legum & Norman Realty Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/157 Rpt: 77/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ketcham, Timothy <hr/> 6 Contributor address; City; State; Zip Code Fruitland, MD 21826	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keys, Janci <hr/> Contributor address; City; State; Zip Code Arden, NC 28704	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Marketing-Specialist		Employer (See Instructions) IPM Corp of Brevard Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keys, Janci <hr/> Contributor address; City; State; Zip Code Arden, NC 28704	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Marketing-Specialist		Employer (See Instructions) IPM Corp of Brevard Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Morgan <hr/> Contributor address; City; State; Zip Code Hoover, AL 35226	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) McKay Management Corp
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Morgan <hr/> Contributor address; City; State; Zip Code Hoover, AL 35226	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) McKay Management Corp

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/157 Rpt: 78/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kitchin, Margaret <hr/> 6 Contributor address; City; State; Zip Code North Wales, PA 19454	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Bus Devolp-VP		9 Employer (See Instructions) Mid Atlantic Management Corp
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kitchin, Margaret <hr/> Contributor address; City; State; Zip Code North Wales, PA 19454	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Bus Devolp-VP		Employer (See Instructions) Mid Atlantic Management Corp
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Jeri <hr/> Contributor address; City; State; Zip Code Dickinson, TX 77539	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) Houston Community Mgmt Service
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klein, Jeri <hr/> Contributor address; City; State; Zip Code Dickinson, TX 77539	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) Houston Community Mgmt Service
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kluever, Larry <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) General Counsel-Asst		Employer (See Instructions) Corporate Headquarters

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/157 Rpt: 79/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kluever, Larry <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75231	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) General Counsel-Asst		9 Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knoop, Danika <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) OPS-Dir-Corporate Dev		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knoop, Danika <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) OPS-Dir-Corporate Dev		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kraft, Meredith <hr/> Contributor address; City; State; Zip Code Union Bridge, MD 21791	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kraft, Meredith <hr/> Contributor address; City; State; Zip Code Union Bridge, MD 21791	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) CMC Virginia

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/157 Rpt: 80/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krueger, John <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070	7 Amount of Contribution (\$) \$110.00
8 Principal occupation / Job title (See Instructions) Govmt Affairs-VP		9 Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krueger, John <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$110.00
Principal occupation / Job title (See Instructions) Govmt Affairs-VP		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruppa, Brian <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) Chief Legal Officer		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruppa, Brian <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$85.00
Principal occupation / Job title (See Instructions) Chief Legal Officer		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDELL, JASON <hr/> Contributor address; City; State; Zip Code Henderson, NV 89052	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Ops-Dir		Employer (See Instructions) Associa Nevada South

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/157 Rpt: 81/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDELL, JASON <hr/> 6 Contributor address; City; State; Zip Code Henderson, NV 89052	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Ops-Dir		9 Employer (See Instructions) Associa Nevada South
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUSCOMBE, JILL <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48073	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acct Mgmt-Mgr		Employer (See Instructions) Land Arc Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUSCOMBE, JILL <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48073	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acct Mgmt-Mgr		Employer (See Instructions) Land Arc Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCroix, Brooke <hr/> Contributor address; City; State; Zip Code Daytona Beach, FL 32114	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Evergreen Harvard Group LLC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaCroix, Brooke <hr/> Contributor address; City; State; Zip Code Daytona Beach, FL 32114	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Evergreen Harvard Group LLC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/157 Rpt: 82/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaGrange, Suzanne 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) Community-Dir (Branch)		9 Employer (See Instructions) PMG North Texas
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lainez, Gita Contributor address; City; State; Zip Code Fairfax, VA 22030	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lainez, Gita Contributor address; City; State; Zip Code Fairfax, VA 22030	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) CMC Virginia
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landrum, Vanessa Contributor address; City; State; Zip Code Indio, CA 92203	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-Dir		Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landrum, Vanessa Contributor address; City; State; Zip Code Indio, CA 92203	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-Dir		Employer (See Instructions) Desert Resort Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/157 Rpt: 83/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laney, Robbi <hr/> 6 Contributor address; City; State; Zip Code Raleigh, NC 27604	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) H.R.W. INC.
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laney, Robbi <hr/> Contributor address; City; State; Zip Code Raleigh, NC 27604	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) H.R.W. INC.
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanin-Trina, Michele <hr/> Contributor address; City; State; Zip Code Algonquin, IL 60102	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Chicagoland
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanin-Trina, Michele <hr/> Contributor address; City; State; Zip Code Algonquin, IL 60102	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Chicagoland
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lape, Hilary <hr/> Contributor address; City; State; Zip Code Fredericksburg, VA 22406	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/157 Rpt: 84/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lape, Hilary <hr/> 6 Contributor address; City; State; Zip Code Fredericksburg, VA 22406	7 Amount of Contribution (\$) \$22.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laurie, Michelle <hr/> Contributor address; City; State; Zip Code Bell Buckle, TN 37020	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Associa Tennessee
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laurie, Michelle <hr/> Contributor address; City; State; Zip Code Bell Buckle, TN 37020	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Associa Tennessee
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, David <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, David <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/157 Rpt: 85/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leazer, Tamara <hr/> 6 Contributor address; City; State; Zip Code Loganville, GA 30052	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Property-Mgr (I)		9 Employer (See Instructions) Community Management Assoc Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leazer, Tamara <hr/> Contributor address; City; State; Zip Code Loganville, GA 30052	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Property-Mgr (I)		Employer (See Instructions) Community Management Assoc Inc
Date 06/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lenau, Stacey <hr/> Contributor address; City; State; Zip Code Vass, NC 28394	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Director of HR		Employer (See Instructions) CAMS
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lenau, Stacey <hr/> Contributor address; City; State; Zip Code Vass, NC 28394	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Director of HR		Employer (See Instructions) CAMS
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lippert, Marc <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92211	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Ops-Dir (Branch)		Employer (See Instructions) Associa OnCall California Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/157 Rpt: 86/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lippert, Marc <hr/> 6 Contributor address; City; State; Zip Code Palm Desert, CA 92211	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Ops-Dir (Branch)		9 Employer (See Instructions) Associa OnCall California Inc
Date 06/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Christina <hr/> Contributor address; City; State; Zip Code New Bern, NC 28560	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community Manager		Employer (See Instructions) CAMS
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Christina <hr/> Contributor address; City; State; Zip Code New Bern, NC 28560	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community Manager		Employer (See Instructions) CAMS
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Kimberly <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Mgr-Asst		Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Kimberly <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Mgr-Asst		Employer (See Instructions) Desert Resort Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/157 Rpt: 87/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Raul	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Wylie, TX 75098		
8 Principal occupation / Job title (See Instructions) Acctng-Supr		9 Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Raul	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Wylie, TX 75098		
Principal occupation / Job title (See Instructions) Acctng-Supr		Employer (See Instructions) CSSC
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lounsbery, Carolyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Sterling Heights, MI 48313		
Principal occupation / Job title (See Instructions) Ops-Dir		Employer (See Instructions) Kramer Triad Management Group
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lounsbery, Carolyn	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Sterling Heights, MI 48313		
Principal occupation / Job title (See Instructions) Ops-Dir		Employer (See Instructions) Kramer Triad Management Group
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loya, Tammie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Waxachie, TX 75165		
Principal occupation / Job title (See Instructions) Acctng-Supr		Employer (See Instructions) Corporate Headquarters

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/157 Rpt: 88/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loya, Tammie <hr/> 6 Contributor address; City; State; Zip Code Waxachie, TX 75165	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Acctng-Supr		9 Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCILYAR, HANG <hr/> Contributor address; City; State; Zip Code Richmond, VA 23228	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Admin-Office-Mgr		Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCILYAR, HANG <hr/> Contributor address; City; State; Zip Code Richmond, VA 23228	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Admin-Office-Mgr		Employer (See Instructions) Community Group Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magale, Gloria <hr/> Contributor address; City; State; Zip Code Arlington, MA 02474	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) HR-Mgr		Employer (See Instructions) Dartmouth
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magale, Gloria <hr/> Contributor address; City; State; Zip Code Arlington, MA 02474	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) HR-Mgr		Employer (See Instructions) Dartmouth

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/157 Rpt: 89/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malavathu, Poornashri <hr/> 6 Contributor address; City; State; Zip Code Chantilly, VA 20152	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Finan-Analyst		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malavathu, Poornashri <hr/> Contributor address; City; State; Zip Code Chantilly, VA 20152	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Finan-Analyst		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallory, Tammy <hr/> Contributor address; City; State; Zip Code Panama City, FL 32404	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Burg Management Co Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallory, Tammy <hr/> Contributor address; City; State; Zip Code Panama City, FL 32404	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Burg Management Co Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mancilla, Lynda <hr/> Contributor address; City; State; Zip Code La Quinta, CA 92253	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) General Mgr-Asst		Employer (See Instructions) Desert Resort Management

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/157 Rpt: 90/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mancilla, Lynda <hr/> 6 Contributor address; City; State; Zip Code La Quinta, CA 92253	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) General Mgr-Asst		9 Employer (See Instructions) Desert Resort Management
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcou, Amalea <hr/> Contributor address; City; State; Zip Code West Chicago, IL 60185	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Trainer-Sr		Employer (See Instructions) Associa Chicagoland
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcou, Amalea <hr/> Contributor address; City; State; Zip Code West Chicago, IL 60185	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Trainer-Sr		Employer (See Instructions) Associa Chicagoland
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcou, Carol <hr/> Contributor address; City; State; Zip Code Palatine, IL 60067	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Chicagoland
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcou, Carol <hr/> Contributor address; City; State; Zip Code Palatine, IL 60067	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Chicagoland

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/157 Rpt: 91/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Joy <hr/> 6 Contributor address; City; State; Zip Code Norco, CA 92860	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) PCM California
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Joy <hr/> Contributor address; City; State; Zip Code Norco, CA 92860	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) PCM California
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Linda <hr/> Contributor address; City; State; Zip Code Canton, MI 48188	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Kramer Triad Management Group
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Linda <hr/> Contributor address; City; State; Zip Code Canton, MI 48188	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Kramer Triad Management Group
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Melissa <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) Principal Mgmt Group Houston

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/157 Rpt: 92/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Melissa	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Spring, TX 77379	
8 Principal occupation / Job title (See Instructions) General Mgr (II)		9 Employer (See Instructions) Principal Mgmt Group Houston
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marton, Sue	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code Richmond, VA 23235	
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marton, Sue	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code Richmond, VA 23235	
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Community Group Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martone, Nicole	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Cliffside Park, NJ 07010	
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) CMC NJ
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martone, Nicole	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Cliffside Park, NJ 07010	
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) CMC NJ

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/157 Rpt: 93/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massart, Savannah <hr/> 6 Contributor address; City; State; Zip Code Columbus, OH 43235	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Code Enforc-Assc		9 Employer (See Instructions) Real Property Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massart, Savannah <hr/> Contributor address; City; State; Zip Code Columbus, OH 43235	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Code Enforc-Assc		Employer (See Instructions) Real Property Management
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathews, Darla <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) PMG North Texas
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathews, Darla <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) PMG North Texas
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxfield, Joy <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76133	Amount of Contribution (\$) \$11.62
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) PMG North Texas

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/157 Rpt: 94/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxfield, Joy <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76133	7 Amount of Contribution (\$) \$11.62
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) PMG North Texas
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzarella, Nicholas <hr/> Contributor address; City; State; Zip Code Potomac Falls, VA 20165	Amount of Contribution (\$) \$32.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzarella, Nicholas <hr/> Contributor address; City; State; Zip Code Potomac Falls, VA 20165	Amount of Contribution (\$) \$32.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) CMC Virginia
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Robert <hr/> Contributor address; City; State; Zip Code Concord, MA 01742	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Dartmouth
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Robert <hr/> Contributor address; City; State; Zip Code Concord, MA 01742	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Dartmouth

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/157 Rpt: 95/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClelland, Demetria <hr/> 6 Contributor address; City; State; Zip Code Standish, MI 48658	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Kramer Triad Management Group
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClelland, Demetria <hr/> Contributor address; City; State; Zip Code Standish, MI 48658	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Kramer Triad Management Group
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCoy, Marc <hr/> Contributor address; City; State; Zip Code Nokesville, VA 20181	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCoy, Marc <hr/> Contributor address; City; State; Zip Code Nokesville, VA 20181	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDevitt, Shane <hr/> Contributor address; City; State; Zip Code Costa Mesa, CA 92627	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Acctant (I)		Employer (See Instructions) PCM California

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/157 Rpt: 96/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDevitt, Shane <hr/> 6 Contributor address; City; State; Zip Code Costa Mesa, CA 92627	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Acctant (I)		9 Employer (See Instructions) PCM California
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Kim <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Acctng-VP		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Kim <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Acctng-VP		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mejia, Lucia <hr/> Contributor address; City; State; Zip Code Bacliff, TX 77518	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Houston Community Mgmt Service
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mejia, Lucia <hr/> Contributor address; City; State; Zip Code Bacliff, TX 77518	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Houston Community Mgmt Service

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/157 Rpt: 97/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendez, Joanne <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75243	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Acctng-Spec (I)		9 Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendez, Joanne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Cameron <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76133	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Concierge-Sr		Employer (See Instructions) Somerset Association Managemen
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Cameron <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76133	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Concierge-Sr		Employer (See Instructions) Somerset Association Managemen
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Kathleen <hr/> Contributor address; City; State; Zip Code Blaine, MN 55434	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Escrow/Resale-Spec		Employer (See Instructions) Cities Management Inc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/157 Rpt: 98/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Blaine, MN 55434	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Escrow/Resale-Spec		9 Employer (See Instructions) Cities Management Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Daniel <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Daniel <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, John <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Principal Mgmt Group Houston
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, John <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Principal Mgmt Group Houston

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/157 Rpt: 99/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Lori	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Fishers, IN 46038		
8 Principal occupation / Job title (See Instructions) Maint-Coord		9 Employer (See Instructions) CASI
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Lori	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Fishers, IN 46038		
Principal occupation / Job title (See Instructions) Maint-Coord		Employer (See Instructions) CASI
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Corsicana, TX 75110		
Principal occupation / Job title (See Instructions) Ins-Acct Exec		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Susan	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Corsicana, TX 75110		
Principal occupation / Job title (See Instructions) Ins-Acct Exec		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller-Napue, Yolanda	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Minneapolis, MN 55409		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Associa Minnesota

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/157 Rpt: 100/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller-Napue, Yolanda <hr/> 6 Contributor address; City; State; Zip Code Minneapolis, MN 55409	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Associa Minnesota
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Brenda <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Acctng-Dir		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Brenda <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Acctng-Dir		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Louise <hr/> Contributor address; City; State; Zip Code Bacliff, TX 77518	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Houston Community Mgmt Service
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Louise <hr/> Contributor address; City; State; Zip Code Bacliff, TX 77518	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Houston Community Mgmt Service

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/157 Rpt: 101/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Eddie <hr/> 6 Contributor address; City; State; Zip Code Honolulu, HI 96825	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) Associa Hawaii
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Eddie <hr/> Contributor address; City; State; Zip Code Honolulu, HI 96825	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Hawaii
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morano, Daly-Anne <hr/> Contributor address; City; State; Zip Code Gaithersburg, MD 20878	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr-Asst		Employer (See Instructions) Legum & Norman Realty Inc.
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Erica <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Bus Devolp-VP		Employer (See Instructions) Principal Mgmt Group Houston
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Erica <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$14.00
Principal occupation / Job title (See Instructions) Bus Devolp-VP		Employer (See Instructions) Principal Mgmt Group Houston

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/157 Rpt: 102/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morin, JoAngela	7 Amount of Contribution (\$) \$4.00
6 Contributor address; City; State; Zip Code Anna, TX 75409		
8 Principal occupation / Job title (See Instructions) Acctng-Dir (CSSC)		9 Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morin, JoAngela	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Anna, TX 75409		
Principal occupation / Job title (See Instructions) Acctng-Dir (CSSC)		Employer (See Instructions) CSSC
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munoz, Gabriella	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Rowlett, TX 75088		
Principal occupation / Job title (See Instructions) Acctng-Banking Spec (I)		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munoz, Gabriella	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Rowlett, TX 75088		
Principal occupation / Job title (See Instructions) Acctng-Banking Spec (I)		Employer (See Instructions) CSSC
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munoz, Karen	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Rowlett, TX 75088		
Principal occupation / Job title (See Instructions) Acctng-Mgr-Sr		Employer (See Instructions) CSSC

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/157 Rpt: 103/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munoz, Karen <hr/> 6 Contributor address; City; State; Zip Code Rowlett, TX 75088	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Acctng-Mgr-Sr		9 Employer (See Instructions) CSSC
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munson, Kristin <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Somerset Association Managemen
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munson, Kristin <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Somerset Association Managemen
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Carrie <hr/> Contributor address; City; State; Zip Code Bluffton, SC 29910	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Client Acctng-Dir		Employer (See Instructions) Atlantic States Management
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Carrie <hr/> Contributor address; City; State; Zip Code Bluffton, SC 29910	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Client Acctng-Dir		Employer (See Instructions) Atlantic States Management

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/157 Rpt: 104/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mushinski, Lisa <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77406	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Client Acctng-Spec		9 Employer (See Instructions) Principal Mgmt Group Houston
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mushinski, Lisa <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) Principal Mgmt Group Houston
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mutothori, Penina <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mutothori, Penina <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Aimee <hr/> Contributor address; City; State; Zip Code Plain City, OH 43064	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Real Property Management

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/157 Rpt: 105/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Aimee <hr/> 6 Contributor address; City; State; Zip Code Plain City, OH 43064	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Real Property Management
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIAZ, SOFIA <hr/> Contributor address; City; State; Zip Code WOODBURY, MN 55129	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Rec-Dir		Employer (See Instructions) Associa Minnesota
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIAZ, SOFIA <hr/> Contributor address; City; State; Zip Code WOODBURY, MN 55129	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Rec-Dir		Employer (See Instructions) Associa Minnesota
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, CHELSEA <hr/> Contributor address; City; State; Zip Code Sachse, TX 75048	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) PMG North Texas
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, CHELSEA <hr/> Contributor address; City; State; Zip Code Sachse, TX 75048	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) PMG North Texas

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/157 Rpt: 106/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neely, Carolyn <hr/> 6 Contributor address; City; State; Zip Code Hilton Head, SC 29928	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Association Services Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neely, Carolyn <hr/> Contributor address; City; State; Zip Code Hilton Head, SC 29928	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Association Services Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Jennifer <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Acctant-Sr (III)		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Jennifer <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Acctant-Sr (III)		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Tina <hr/> Contributor address; City; State; Zip Code Fredericksburg, VA 22407	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) Legum & Norman Realty Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 104/157 Rpt: 107/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nieves, Marilyn <hr/> 6 Contributor address; City; State; Zip Code Kissimmee, FL 34746	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) CMP Orlando
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nieves, Marilyn <hr/> Contributor address; City; State; Zip Code Kissimmee, FL 34746	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) CMP Orlando
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niles, Reginald <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94566	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Ops-Analyst		Employer (See Instructions) Associa Northern California
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niles, Reginald <hr/> Contributor address; City; State; Zip Code Pleasanton, CA 94566	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Ops-Analyst		Employer (See Instructions) Associa Northern California
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Lisa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) Corporate Headquarters

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/157 Rpt: 108/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Lisa <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75204	7 Amount of Contribution (\$) \$11.00
8 Principal occupation / Job title (See Instructions) Controller		9 Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Quinn, Shawn <hr/> Contributor address; City; State; Zip Code Burke, VA 22015	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Quinn, Shawn <hr/> Contributor address; City; State; Zip Code Burke, VA 22015	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Toole, James <hr/> Contributor address; City; State; Zip Code Deptford, NJ 08096	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Toole, James <hr/> Contributor address; City; State; Zip Code Deptford, NJ 08096	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) MAMCO - Mid Atlantic

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 106/157 Rpt: 109/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oberthier, Claudia <hr/> 6 Contributor address; City; State; Zip Code Carol Stream, IL 60188	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Associa Arizona
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oberthier, Claudia <hr/> Contributor address; City; State; Zip Code Carol Stream, IL 60188	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Arizona
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliva, Vincent <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89147	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Nevada South
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliva, Vincent <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89147	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Nevada South
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orberg, Derrick <hr/> Contributor address; City; State; Zip Code Deland, FL 32724	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) CMP Orlando

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/157 Rpt: 110/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orberg, Derrick <hr/> 6 Contributor address; City; State; Zip Code Deland, FL 32724	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) CMP Orlando
Date 06/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orduno, Richard <hr/> Contributor address; City; State; Zip Code Rolesville, NC 27571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RVP		Employer (See Instructions) CAMS
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orduno, Richard <hr/> Contributor address; City; State; Zip Code Rolesville, NC 27571	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RVP		Employer (See Instructions) CAMS
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Tyleen <hr/> Contributor address; City; State; Zip Code Centennial, CO 80015	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Associa Colorado
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Tyleen <hr/> Contributor address; City; State; Zip Code Centennial, CO 80015	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Associa Colorado

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/157 Rpt: 111/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PONGRATZ, PAMELA	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code CARLSBAD, CA 92010		
8 Principal occupation / Job title (See Instructions) Ops-Analyst		9 Employer (See Instructions) The Prescott Companies Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PONGRATZ, PAMELA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code CARLSBAD, CA 92010		
Principal occupation / Job title (See Instructions) Ops-Analyst		Employer (See Instructions) The Prescott Companies Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Packard, Michael	Amount of Contribution (\$) \$31.00
Contributor address; City; State; Zip Code Carlsbad, CA 92009		
Principal occupation / Job title (See Instructions) Bus Devolp-VP-Sr		Employer (See Instructions) Associa Northern California
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Packard, Michael	Amount of Contribution (\$) \$31.00
Contributor address; City; State; Zip Code Carlsbad, CA 92009		
Principal occupation / Job title (See Instructions) Bus Devolp-VP-Sr		Employer (See Instructions) Associa Northern California
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearre, Michelle	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code ljamsville, MD 21754		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Legum & Norman Realty Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/157 Rpt: 112/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearre, Michelle <hr/> 6 Contributor address; City; State; Zip Code Ijamsville, MD 21754	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perea, Idella <hr/> Contributor address; City; State; Zip Code Terrell, TX 75160	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HR-VP		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perea, Idella <hr/> Contributor address; City; State; Zip Code Terrell, TX 75160	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) HR-VP		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Javier <hr/> Contributor address; City; State; Zip Code Miami, FL 33143	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Ops-Dir		Employer (See Instructions) Marquis
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Javier <hr/> Contributor address; City; State; Zip Code Miami, FL 33143	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Ops-Dir		Employer (See Instructions) Marquis

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/157 Rpt: 113/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Yolanda 6 Contributor address; City; State; Zip Code The Colony, TX 75056	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Cust Serv-VP		9 Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Yolanda Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Cust Serv-VP		Employer (See Instructions) CSSC
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, James Contributor address; City; State; Zip Code Annandale, VA 22003	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) General Mgr (III)		Employer (See Instructions) CMC Virginia
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pesce, Michael Contributor address; City; State; Zip Code Chester, NJ 07930	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) CMC NJ
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pesce, Michael Contributor address; City; State; Zip Code Chester, NJ 07930	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) CMC NJ

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/157 Rpt: 114/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pettyjohn, Joseph <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78749	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) General Mgr (I)		9 Employer (See Instructions) Somerset Association Managemen
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pettyjohn, Joseph <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Somerset Association Managemen
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phillips, Bryant <hr/> Contributor address; City; State; Zip Code Aldie, VA 20105	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) CMC Virginia
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pisano, Linda <hr/> Contributor address; City; State; Zip Code Tampa, FL 33626	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Associa Gulf Coast Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pisano, Linda <hr/> Contributor address; City; State; Zip Code Tampa, FL 33626	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Associa Gulf Coast Inc

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/157 Rpt: 115/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plescia, Mary	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code North Hollywood, CA 91606		
8 Principal occupation / Job title (See Instructions) General Mgr (I)		9 Employer (See Instructions) PCM California
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plescia, Mary	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code North Hollywood, CA 91606		
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) PCM California
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porras, Ruben	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Lewisville, TX 75067		
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porras, Ruben	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Lewisville, TX 75067		
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poynter, Tammy	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Richmond, VA 23233		
Principal occupation / Job title (See Instructions) Acctng-Spec (II)		Employer (See Instructions) Community Group Inc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/157 Rpt: 116/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poynter, Tammy <hr/> 6 Contributor address; City; State; Zip Code Richmond, VA 23233	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Acctng-Spec (II)		9 Employer (See Instructions) Community Group Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINONES, CYNTHIA <hr/> Contributor address; City; State; Zip Code PONTIAC, MI 48340	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) Land Arc Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) QUINONES, CYNTHIA <hr/> Contributor address; City; State; Zip Code PONTIAC, MI 48340	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) Land Arc Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Michelle <hr/> Contributor address; City; State; Zip Code Burlington, NJ 08016	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Finance-VP (Branch)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Michelle <hr/> Contributor address; City; State; Zip Code Burlington, NJ 08016	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Finance-VP (Branch)		Employer (See Instructions) MAMCO - Mid Atlantic

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/157 Rpt: 117/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quintana, Carolyn <hr/> 6 Contributor address; City; State; Zip Code Banning, CA 92220	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) General Mgr (I)		9 Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quintana, Carolyn <hr/> Contributor address; City; State; Zip Code Banning, CA 92220	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGALADO, SEBERINO <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Hill Country
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) REGALADO, SEBERINO <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Hill Country
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBY, GREGORY <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22311	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/157 Rpt: 118/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBY, GREGORY <hr/> 6 Contributor address; City; State; Zip Code Alexandria, VA 22311	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radek, Karyn <hr/> Contributor address; City; State; Zip Code Cary, IL 60013	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Associa Chicagoland
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radek, Karyn <hr/> Contributor address; City; State; Zip Code Cary, IL 60013	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Associa Chicagoland
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ratliff, Annette <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Chief of Staff		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ratliff, Annette <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) Chief of Staff		Employer (See Instructions) Corporate Headquarters

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/157 Rpt: 119/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Remillard, Reid <hr/> 6 Contributor address; City; State; Zip Code Epping, NH 03042	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Evergreen Harvard Group LLC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Remillard, Reid <hr/> Contributor address; City; State; Zip Code Epping, NH 03042	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Evergreen Harvard Group LLC
Date 06/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Benjamin <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28226	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SVP		Employer (See Instructions) CAMS
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Benjamin <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28226	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) SVP		Employer (See Instructions) CAMS
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richmond, Rachel <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) Principal Mgmt Group Houston

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/157 Rpt: 120/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richmond, Rachel <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77057	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) General Mgr (II)		9 Employer (See Instructions) Principal Mgmt Group Houston
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rieta, Tiffany <hr/> Contributor address; City; State; Zip Code Mililani, HI 96789	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Associa Hawaii
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rieta, Tiffany <hr/> Contributor address; City; State; Zip Code Mililani, HI 96789	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Associa Hawaii
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riska, Charles <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riska, Charles <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) Corporate Headquarters

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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritter, Paula <hr/> 6 Contributor address; City; State; Zip Code Reno, NV 89509	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Acctng-Mgr (Branch)		9 Employer (See Instructions) Associa Nevada South
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritter, Paula <hr/> Contributor address; City; State; Zip Code Reno, NV 89509	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acctng-Mgr (Branch)		Employer (See Instructions) Associa Nevada South
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas, Joseph <hr/> Contributor address; City; State; Zip Code Weslaco, TX 78599	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Hill Country
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas, Joseph <hr/> Contributor address; City; State; Zip Code Weslaco, TX 78599	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Hill Country
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Veronica <hr/> Contributor address; City; State; Zip Code Mecca, CA 92254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-Mgr		Employer (See Instructions) Desert Resort Management Wkly

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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Veronica <hr/> 6 Contributor address; City; State; Zip Code Mecca, CA 92254	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Ops-Mgr		9 Employer (See Instructions) Desert Resort Management Wkly
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Veronica <hr/> Contributor address; City; State; Zip Code Mecca, CA 92254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-Mgr		Employer (See Instructions) Desert Resort Management Wkly
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Veronica <hr/> Contributor address; City; State; Zip Code Mecca, CA 92254	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-Mgr		Employer (See Instructions) Desert Resort Management Wkly
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rix, Alex <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Hill Country
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rix, Alex <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Hill Country

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/157 Rpt: 123/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Samuel <hr/> 6 Contributor address; City; State; Zip Code Palm Desert, CA 92211	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) General Mgr (I)		9 Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Samuel <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92211	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronan, Ashleigh <hr/> Contributor address; City; State; Zip Code Gainesville, GA 30506	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Facilities-Dir		Employer (See Instructions) Radius Construction Group Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronan, Ashleigh <hr/> Contributor address; City; State; Zip Code Gainesville, GA 30506	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Facilities-Dir		Employer (See Instructions) Radius Construction Group Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Bryce <hr/> Contributor address; City; State; Zip Code Sandy, UT 84094	Amount of Contribution (\$) \$7.77
Principal occupation / Job title (See Instructions) Ops-Dir		Employer (See Instructions) Community Solutions Property

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/157 Rpt: 124/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Bryce <hr/> 6 Contributor address; City; State; Zip Code Sandy, UT 84094	7 Amount of Contribution (\$) \$7.77
8 Principal occupation / Job title (See Instructions) Ops-Dir		9 Employer (See Instructions) Community Solutions Property
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rossi, Gina <hr/> Contributor address; City; State; Zip Code Elwood, IL 60421	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Sales-Dir		Employer (See Instructions) Associa Chicagoland
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rossi, Gina <hr/> Contributor address; City; State; Zip Code Elwood, IL 60421	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Sales-Dir		Employer (See Instructions) Associa Chicagoland
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruff, Christine <hr/> Contributor address; City; State; Zip Code Chicago, IL 60608	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Associa Chicagoland
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruff, Christine <hr/> Contributor address; City; State; Zip Code Chicago, IL 60608	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Associa Chicagoland

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/157 Rpt: 125/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rupp, Kelly <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92101	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) General Mgr (I)		9 Employer (See Instructions) The Prescott Companies Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rupp, Kelly <hr/> Contributor address; City; State; Zip Code San Diego, CA 92101	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) The Prescott Companies Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rust, Maria <hr/> Contributor address; City; State; Zip Code Arlington, TX 76005	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rust, Maria <hr/> Contributor address; City; State; Zip Code Arlington, TX 76005	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Patrick <hr/> Contributor address; City; State; Zip Code Folsom, CA 95630	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Northern California

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/157 Rpt: 126/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Patrick <hr/> 6 Contributor address; City; State; Zip Code Folsom, CA 95630	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Associa Northern California
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCRIMSHER, KARLA <hr/> Contributor address; City; State; Zip Code Murrieta, CA 92563	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) The Prescott Companies Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCRIMSHER, KARLA <hr/> Contributor address; City; State; Zip Code Murrieta, CA 92563	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) The Prescott Companies Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Karen <hr/> Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) Principal Mgmt Group Houston
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Karen <hr/> Contributor address; City; State; Zip Code Houston, TX 77084	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) Principal Mgmt Group Houston

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/157 Rpt: 127/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sands, Arielle	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Woodbridge, VA 22191		
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santangelo, Paula	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Norristown, PA 19403		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Mid Atlantic Management Corp
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santangelo, Paula	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Norristown, PA 19403		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Mid Atlantic Management Corp
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schemanske, Lisa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code South Lyon, MI 48178		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Kramer Triad Management Group
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schemanske, Lisa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code South Lyon, MI 48178		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Kramer Triad Management Group

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/157 Rpt: 128/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlapkohl, Tyler <hr/> 6 Contributor address; City; State; Zip Code Farmer Branch, TX 75234	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Ins-Sales Exec-Sr		9 Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlapkohl, Tyler <hr/> Contributor address; City; State; Zip Code Farmer Branch, TX 75234	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ins-Sales Exec-Sr		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Christine <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75089	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Marketing-VP		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Christine <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75089	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Marketing-VP		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmitt, Laura <hr/> Contributor address; City; State; Zip Code East Walpole, MA 02032	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Dartmouth

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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmitt, Laura <hr/> 6 Contributor address; City; State; Zip Code East Walpole, MA 02032	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		9 Employer (See Instructions) Dartmouth
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scull, Thomas <hr/> Contributor address; City; State; Zip Code Voorhees, NJ 08043	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scull, Thomas <hr/> Contributor address; City; State; Zip Code Voorhees, NJ 08043	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sedwick, Judith <hr/> Contributor address; City; State; Zip Code Tallahassee, FL 32312	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) CMC Jacksonville
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Semanisin, Tiffany <hr/> Contributor address; City; State; Zip Code Sterling Heights, MI 48310	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Land Arc Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/157 Rpt: 130/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Semanisin, Tiffany <hr/> 6 Contributor address; City; State; Zip Code Sterling Heights, MI 48310	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Community-Dir (Branch)		9 Employer (See Instructions) Land Arc Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Severance, Jennifer <hr/> Contributor address; City; State; Zip Code Maricopa, AZ 85138	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR-VP (Regional)		Employer (See Instructions) Associa Arizona
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Severance, Jennifer <hr/> Contributor address; City; State; Zip Code Maricopa, AZ 85138	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR-VP (Regional)		Employer (See Instructions) Associa Arizona
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Sales-VP		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Robert <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Sales-VP		Employer (See Instructions) Corporate Headquarters

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/157 Rpt: 131/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siouville, Andrew <hr/> 6 Contributor address; City; State; Zip Code Apex, NC 27539	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) H.R.W. INC.
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siouville, Andrew <hr/> Contributor address; City; State; Zip Code Apex, NC 27539	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) H.R.W. INC.
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siterlet, Thomas <hr/> Contributor address; City; State; Zip Code Troy, MI 48083	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Field Serv-Dir		Employer (See Instructions) Kramer Triad Management Group
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siterlet, Thomas <hr/> Contributor address; City; State; Zip Code Troy, MI 48083	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Field Serv-Dir		Employer (See Instructions) Kramer Triad Management Group
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skelley, Stephanie <hr/> Contributor address; City; State; Zip Code La Grange, IL 60525	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) Associa Chicagoland

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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skelley, Stephanie <hr/> 6 Contributor address; City; State; Zip Code La Grange, IL 60525	7 Amount of Contribution (\$) \$17.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Regional)		9 Employer (See Instructions) Associa Chicagoland
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slater, Erica <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Sales-Dir (Regional)		Employer (See Instructions) Houston Community Mgmt Service
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slater, Erica <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Sales-Dir (Regional)		Employer (See Instructions) Houston Community Mgmt Service
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloan, Sarai <hr/> Contributor address; City; State; Zip Code Milton, KS 67106	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Office-Mgr		Employer (See Instructions) Houston Community Mgmt Service
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloan, Sarai <hr/> Contributor address; City; State; Zip Code Milton, KS 67106	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Office-Mgr		Employer (See Instructions) Houston Community Mgmt Service

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/157 Rpt: 133/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Gregory <hr/> 6 Contributor address; City; State; Zip Code Lodi, CA 95240	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Training-Dir		9 Employer (See Instructions) Associa Northern California
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Gregory <hr/> Contributor address; City; State; Zip Code Lodi, CA 95240	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Training-Dir		Employer (See Instructions) Associa Northern California
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sookdeo-Palbalkar, Annupa <hr/> Contributor address; City; State; Zip Code Fredericksburg, VA 22408	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) CMC Virginia
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southall, Mark <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) PMG North Texas
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Southall, Mark <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) PMG North Texas

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/157 Rpt: 134/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spradley, Heather <hr/> 6 Contributor address; City; State; Zip Code Land O Lakes, FL 34639	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) Associa Gulf Coast Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spradley, Heather <hr/> Contributor address; City; State; Zip Code Land O Lakes, FL 34639	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Gulf Coast Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stabler, Denez <hr/> Contributor address; City; State; Zip Code Midlothian, VA 23113	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Ops-Mgr		Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stabler, Denez <hr/> Contributor address; City; State; Zip Code Midlothian, VA 23113	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Ops-Mgr		Employer (See Instructions) Community Group Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, John <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) IT-Adminstr-VP-Sr		Employer (See Instructions) Corporate Headquarters

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/157 Rpt: 135/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steele, John <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75035	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) IT-Adminstr-VP-Sr		9 Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stern, Dan <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11213	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stern, Dan <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11213	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stockman, Wendy <hr/> Contributor address; City; State; Zip Code Grove City, OH 43123	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr-Asst		Employer (See Instructions) Real Property Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stockman, Wendy <hr/> Contributor address; City; State; Zip Code Grove City, OH 43123	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr-Asst		Employer (See Instructions) Real Property Management

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/157 Rpt: 136/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoutamire, Danielle <hr/> 6 Contributor address; City; State; Zip Code Cumming, GA 30041	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr-Asst		9 Employer (See Instructions) Homeside Properties
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoutamire, Danielle <hr/> Contributor address; City; State; Zip Code Cumming, GA 30041	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr-Asst		Employer (See Instructions) Homeside Properties
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Streenz, Shannon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Streenz, Shannon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuemke, Kathryn <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55447	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Cities Management Inc

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/157 Rpt: 137/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuemke, Kathryn <hr/> 6 Contributor address; City; State; Zip Code Minneapolis, MN 55447	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Cities Management Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturges, Shelley <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Legal-Mgr		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturges, Shelley <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Legal-Mgr		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Kevin <hr/> Contributor address; City; State; Zip Code Livonia, MI 48154	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Kramer Triad Management Group
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Kevin <hr/> Contributor address; City; State; Zip Code Livonia, MI 48154	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Kramer Triad Management Group

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/157 Rpt: 138/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surdock, Brandon <hr/> 6 Contributor address; City; State; Zip Code Palm Desert, CA 92260	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) General Mgr (I)		9 Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surdock, Brandon <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Andrea <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Legal-VP		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Andrea <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Legal-VP		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Szatmari, Darla <hr/> Contributor address; City; State; Zip Code Las Vegas, NV 89130	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Associa Nevada South

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/157 Rpt: 139/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Szatmari, Darla	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Las Vegas, NV 89130		
8 Principal occupation / Job title (See Instructions) Admin-Asst		9 Employer (See Instructions) Associa Nevada South
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabanou, Sue	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Tomball, TX 77375		
Principal occupation / Job title (See Instructions) Rec-Dir		Employer (See Instructions) Principal Mgmt Group Houston
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabanou, Sue	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Tomball, TX 77375		
Principal occupation / Job title (See Instructions) Rec-Dir		Employer (See Instructions) Principal Mgmt Group Houston
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Takahashi, Satoko	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Wailuku, HI 96793		
Principal occupation / Job title (See Instructions) Acctant (I)		Employer (See Instructions) Pacific Breeze Properties
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Takahashi, Satoko	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Wailuku, HI 96793		
Principal occupation / Job title (See Instructions) Acctant (I)		Employer (See Instructions) Pacific Breeze Properties

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/157 Rpt: 140/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Paula <hr/> 6 Contributor address; City; State; Zip Code Palm Desert, CA 92261	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Paula <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92261	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Desert Resort Management
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarantino, Jeanne <hr/> Contributor address; City; State; Zip Code Reno, NV 89521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Sierra North
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarantino, Jeanne <hr/> Contributor address; City; State; Zip Code Reno, NV 89521	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Sierra North
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tate, Alan <hr/> Contributor address; City; State; Zip Code Marlton, NJ 08053	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) MAMCO - Mid Atlantic

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/157 Rpt: 141/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tate, Alan <hr/> 6 Contributor address; City; State; Zip Code Marlton, NJ 08053	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Dir (Branch)		9 Employer (See Instructions) MAMCO - Mid Atlantic
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teconchuk, Jon <hr/> Contributor address; City; State; Zip Code Richmond, VA 23235	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teconchuk, Jon <hr/> Contributor address; City; State; Zip Code Richmond, VA 23235	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Community Group Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tellez, Cheyenna <hr/> Contributor address; City; State; Zip Code Fate, TX 75189	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) PMG North Texas
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tellez, Cheyenna <hr/> Contributor address; City; State; Zip Code Fate, TX 75189	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) PMG North Texas

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/157 Rpt: 142/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teran, Isabel <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77088	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Admin-Asst		9 Employer (See Instructions) Principal Mgmt Group Houston
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teran, Isabel <hr/> Contributor address; City; State; Zip Code Houston, TX 77088	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Principal Mgmt Group Houston
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Carol <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Carol <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thermidor, Jackie <hr/> Contributor address; City; State; Zip Code Parlin, NJ 08859	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) CMC NJ

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 140/157 Rpt: 143/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thermidor, Jackie <hr/> 6 Contributor address; City; State; Zip Code Parlin, NJ 08859	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) CMC NJ
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thigpen, Helen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Legal-VP		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thigpen, Helen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Legal-VP		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Patrick <hr/> Contributor address; City; State; Zip Code Bluffton, SC 29910	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Association Services Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Patrick <hr/> Contributor address; City; State; Zip Code Bluffton, SC 29910	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Association Services Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 141/157 Rpt: 144/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomey, Joshua <hr/> 6 Contributor address; City; State; Zip Code Miami, FL 33137	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Marquis
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tomey, Joshua <hr/> Contributor address; City; State; Zip Code Miami, FL 33137	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Marquis
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Melisa <hr/> Contributor address; City; State; Zip Code Rancho Mirage, CA 92270	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Melisa <hr/> Contributor address; City; State; Zip Code Rancho Mirage, CA 92270	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trella, Aaron <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Acctant-Sr (III)		Employer (See Instructions) CSSC

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/157 Rpt: 145/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trella, Aaron <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75023	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Acctant-Sr (III)		9 Employer (See Instructions) CSSC
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsitos, John <hr/> Contributor address; City; State; Zip Code Chantilly, VA 20151	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsitos, John <hr/> Contributor address; City; State; Zip Code Chantilly, VA 20151	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) CMC Virginia
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Alexandra <hr/> Contributor address; City; State; Zip Code Palmetto, FL 34221	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales-VP		Employer (See Instructions) Associa Gulf Coast Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Alexandra <hr/> Contributor address; City; State; Zip Code Palmetto, FL 34221	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales-VP		Employer (See Instructions) Associa Gulf Coast Inc

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/157 Rpt: 146/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urrutia, Jeanette	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Dallas, TX 75252		
8 Principal occupation / Job title (See Instructions) Maint-Custodian		9 Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urrutia, Jeanette	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Dallas, TX 75252		
Principal occupation / Job title (See Instructions) Maint-Custodian		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Jaime	Amount of Contribution (\$) \$11.00
Contributor address; City; State; Zip Code Gainesville, VA 20155		
Principal occupation / Job title (See Instructions) Ops-Analyst-Sr		Employer (See Instructions) CMC Virginia
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Jaime	Amount of Contribution (\$) \$11.00
Contributor address; City; State; Zip Code Gainesville, VA 20155		
Principal occupation / Job title (See Instructions) Ops-Analyst-Sr		Employer (See Instructions) CMC Virginia
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Horn, Dominick	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Shamong, NJ 08088		
Principal occupation / Job title (See Instructions) Field Serv-Dir		Employer (See Instructions) MAMCO - Mid Atlantic

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/157 Rpt: 147/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Horn, Dominick <hr/> 6 Contributor address; City; State; Zip Code Shamong, NJ 08088	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Field Serv-Dir		9 Employer (See Instructions) MAMCO - Mid Atlantic
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanbenschoten, Kristina <hr/> Contributor address; City; State; Zip Code Fredericksburg, VA 22407	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanbenschoten, Kristina <hr/> Contributor address; City; State; Zip Code Fredericksburg, VA 22407	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Community Group Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varghese, Rinu <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) IT-Adminstr-VP		Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varghese, Rinu <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) IT-Adminstr-VP		Employer (See Instructions) Corporate Headquarters

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/157 Rpt: 148/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veazey, Amanda	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Plano, TX 75074		
8 Principal occupation / Job title (See Instructions) Project Mgmt-Dir		9 Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veazey, Amanda	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Plano, TX 75074		
Principal occupation / Job title (See Instructions) Project Mgmt-Dir		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veinot, Rachel	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Woodstock, GA 30188		
Principal occupation / Job title (See Instructions) Project Mgmt-Mgr		Employer (See Instructions) Homeside Properties
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veinot, Rachel	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Woodstock, GA 30188		
Principal occupation / Job title (See Instructions) Project Mgmt-Mgr		Employer (See Instructions) Homeside Properties
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velazquez Jr, Orlando	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Pembroke Pines, FL 33027		
Principal occupation / Job title (See Instructions) General Mgr (III)		Employer (See Instructions) Marquis

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 146/157 Rpt: 149/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velazquez Jr, Orlando <hr/> 6 Contributor address; City; State; Zip Code Pembroke Pines, FL 33027	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) General Mgr (III)		9 Employer (See Instructions) Marquis
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villei, Carol <hr/> Contributor address; City; State; Zip Code Harleysville, PA 19438	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Mid Atlantic Management Corp
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villei, Carol <hr/> Contributor address; City; State; Zip Code Harleysville, PA 19438	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Mid Atlantic Management Corp
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voegele, Christen <hr/> Contributor address; City; State; Zip Code Warminster, PA 18974	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Ops-Dir (Branch)		Employer (See Instructions) Mid Atlantic Management Corp
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voegele, Christen <hr/> Contributor address; City; State; Zip Code Warminster, PA 18974	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Ops-Dir (Branch)		Employer (See Instructions) Mid Atlantic Management Corp

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/157 Rpt: 150/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, KIMBERLY <hr/> 6 Contributor address; City; State; Zip Code ALEXANDRIA, VA 22304	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) General Mgr (I)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, DEBORAH <hr/> Contributor address; City; State; Zip Code LEWES, DE 19958	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, DEBORAH <hr/> Contributor address; City; State; Zip Code LEWES, DE 19958	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Cathy <hr/> Contributor address; City; State; Zip Code Castle Hayne, NC 28429	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) CAMS
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Cathy <hr/> Contributor address; City; State; Zip Code Castle Hayne, NC 28429	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) CAMS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/157 Rpt: 151/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Vickie <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75086	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Acctng-Spec (II)		9 Employer (See Instructions) CSSC
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Darci <hr/> Contributor address; City; State; Zip Code Blaine, MN 55449	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Cities Management Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Darci <hr/> Contributor address; City; State; Zip Code Blaine, MN 55449	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Cities Management Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wait, Morgan <hr/> Contributor address; City; State; Zip Code Euless, TX 76040	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Database-Assc		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wait, Morgan <hr/> Contributor address; City; State; Zip Code Euless, TX 76040	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Database-Assc		Employer (See Instructions) CSSC

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/157 Rpt: 152/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waitt, Debra <hr/> 6 Contributor address; City; State; Zip Code Derry, NH 03038	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Admin-Asst		9 Employer (See Instructions) Evergreen Harvard Group LLC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waitt, Debra <hr/> Contributor address; City; State; Zip Code Derry, NH 03038	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Evergreen Harvard Group LLC
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Jordyn <hr/> Contributor address; City; State; Zip Code Albertville, MN 55301	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-Mgr		Employer (See Instructions) Cities Management Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Jordyn <hr/> Contributor address; City; State; Zip Code Albertville, MN 55301	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-Mgr		Employer (See Instructions) Cities Management Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallis, Clint <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75028	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Real Estate-VP		Employer (See Instructions) Corporate Headquarters

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/157 Rpt: 153/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallis, Clint	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Flower Mound, TX 75028		
8 Principal occupation / Job title (See Instructions) Real Estate-VP		9 Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walter, Trevor	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code The Colony, TX 75056		
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walter, Trevor	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code The Colony, TX 75056		
Principal occupation / Job title (See Instructions) Controller		Employer (See Instructions) CSSC
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Cathedral City, CA 92234		
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, John	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Cathedral City, CA 92234		
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 151/157 Rpt: 154/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Debra <hr/> 6 Contributor address; City; State; Zip Code San Rafael, CA 94901	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Training-VP		9 Employer (See Instructions) N N Jaeschke Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Debra <hr/> Contributor address; City; State; Zip Code San Rafael, CA 94901	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Training-VP		Employer (See Instructions) N N Jaeschke Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Daryl <hr/> Contributor address; City; State; Zip Code Glenn Heights, TX 75154	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Bus-Analyst		Employer (See Instructions) CSSC
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Daryl <hr/> Contributor address; City; State; Zip Code Glenn Heights, TX 75154	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Bus-Analyst		Employer (See Instructions) CSSC
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weckslar, Stephen <hr/> Contributor address; City; State; Zip Code Alpharetta, GA 30004	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sales-Dir (Regional)		Employer (See Instructions) Homeside Properties

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/157 Rpt: 155/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wecksler, Stephen <hr/> 6 Contributor address; City; State; Zip Code Alpharetta, GA 30004	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Sales-Dir (Regional)		9 Employer (See Instructions) Homeside Properties
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiger, Vikki <hr/> Contributor address; City; State; Zip Code Canton, GA 30115	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Homeside Properties
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiger, Vikki <hr/> Contributor address; City; State; Zip Code Canton, GA 30115	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Homeside Properties
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Kevin <hr/> Contributor address; City; State; Zip Code Sewell, NJ 08080	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) MAMCO - Mid Atlantic
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Kevin <hr/> Contributor address; City; State; Zip Code Sewell, NJ 08080	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) MAMCO - Mid Atlantic

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 153/157 Rpt: 156/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Sean <hr/> 6 Contributor address; City; State; Zip Code Grapevine, TX 76051	7 Amount of Contribution (\$) \$59.62
8 Principal occupation / Job title (See Instructions) Sales-VP-Sr		9 Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Sean <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$59.62
Principal occupation / Job title (See Instructions) Sales-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, John <hr/> Contributor address; City; State; Zip Code Arlington, VA 22206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, John <hr/> Contributor address; City; State; Zip Code Arlington, VA 22206	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson-Ellis, Denise <hr/> Contributor address; City; State; Zip Code South Elgin, IL 60177	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Associa Chicagoland

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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson-Ellis, Denise <hr/> 6 Contributor address; City; State; Zip Code South Elgin, IL 60177	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-VP (Branch)		9 Employer (See Instructions) Associa Chicagoland
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiltshire, Heather <hr/> Contributor address; City; State; Zip Code San Diego, CA 92115	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) N N Jaeschke Inc
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiltshire, Heather <hr/> Contributor address; City; State; Zip Code San Diego, CA 92115	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) N N Jaeschke Inc
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wissler, Amy <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Somerset Association Managemen
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wissler, Amy <hr/> Contributor address; City; State; Zip Code Austin, TX 78749	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Somerset Association Managemen

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 155/157 Rpt: 158/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wojczak, Amanda	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Keller, TX 76248		
8 Principal occupation / Job title (See Instructions) Chief HR Officer		9 Employer (See Instructions) Corporate Headquarters
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wojczak, Amanda	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Keller, TX 76248		
Principal occupation / Job title (See Instructions) Chief HR Officer		Employer (See Instructions) Corporate Headquarters
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Jessica	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Port Angeles, WA 98362		
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Blue Mountain Community Mgmt L
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Jessica	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Port Angeles, WA 98362		
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Blue Mountain Community Mgmt L
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Jesica	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Tucson, AZ 85730		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Arizona

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 156/157 Rpt: 159/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 06/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Jesica <hr/> 6 Contributor address; City; State; Zip Code Tucson, AZ 85730	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Associa Arizona
Date 05/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woody, Michelle <hr/> Contributor address; City; State; Zip Code Richmond, VA 23222	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) HR-Mgr		Employer (See Instructions) Community Group Inc
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woody, Michelle <hr/> Contributor address; City; State; Zip Code Richmond, VA 23222	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) HR-Mgr		Employer (See Instructions) Community Group Inc
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Laura <hr/> Contributor address; City; State; Zip Code Colorado Springs, CO 80908	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Colorado
Date 06/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Laura <hr/> Contributor address; City; State; Zip Code Colorado Springs, CO 80908	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Colorado

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 157/157 Rpt: 160/160
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 05/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yasonia-Murphy, Nicholas <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11228	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Property Manager		9 Employer (See Instructions) Choice NY Property Management
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yasonia-Murphy, Nicholas <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11228	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 06/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yopp, Walter <hr/> Contributor address; City; State; Zip Code Wilmington, NC 28411	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) CAMS
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yopp, Walter <hr/> Contributor address; City; State; Zip Code Wilmington, NC 28411	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) CAMS