FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00016609 3 COMMITTEE NAME **OFFICE USE ONLY** Corpus Christi Apartment Association Better Government Fund Date Received **ELECTRONICALLY FILED** 08/29/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 6537 S. Staples Ste125 **PMB 338** Change of Address Corpus Christi, TX 78413 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mrs. Mary M. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Green CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE TREASURER 5151 Flynn Pkwy Pwky STREET **ADDRESS PMB 338** (Residence or Business) Corpus Christi, TX 78411 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 5402 S. Staples #207 MAILING **ADDRESS** Change of Address Corpus Christi, TX 78411 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (361) 852-2787 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 X September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 07/26/2024 08/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

| 2 COMMITTEE NAME | | | 13 Filer ID | (Ethics Commission Filers) |
|---|--|--|-----------------|----------------------------|
| Corpus Christi Apartme | ent Association Better G | overnment Fund | 00016609 | |
| 4 COMMITTEE | 1. Candidates | A. Supported | | |
| ACTIVITY | (Identify by name or, if applicable, classify by party.) | | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | |
| | 2. Measures | A. Supported | | |
| | (Describe by date and location of election and nature of issue.) | | | |
| | | B. Opposed | | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | |
| 5 CONTRIBUTION TOTALS | PLEDGES, LOANS, CONTRIBUTIONS M | D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) | \$ | 0.00 |
| | check here if this report qualifies for the higher itemization threshold TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | \$ | 35.00 |
| 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 | | | 11,616.24 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | | | 2.00 |
| 6 AFFIDAVIT | | | | |
| | | I swear, or affirm, under penalty of true and correct and includes all in under Title 15, Election Code. | | |
| | | Mrs. M | ary M. Green | |
| | | | Campaign Treasu | rer |
| AFFIX NOTARY | / STAMP / SEAL ABOVE | | | |
| Sworn to and subscribed | d before me, by the said | | , this the | day |
| | | which, witness my hand and seal of office. | -, <u></u> | |
| | | | | |
| | | | | |

SUBTOTALS - MPAC

FORM MPAC **COVER SHEET PG 3**

| | | | | 3 of 4 |
|--|---|-------------|--------------|-----------------|
| 17 COMMIT | EE NAME | 18 Filer ID | (Ethics Comr | mission Filers) |
| · · | Christi Apartment Association Better Government Fund | 00016609 | | |
| 19 SCHEDU NAME OF | SUBTO | TAL AMOUNT | | |
| 1. X | \$ | 35.00 | | |
| 2. | \$ | | | |
| 3. | \$ | | | |
| 4. | \$ | | | |
| 5. | \$ | | | |
| 6. | \$ | | | |
| 7. | \$ | | | |
| 8. | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR | \$ | | |
| 9. | \$ | | | |
| 10. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | | | | |
| 11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | | | |
| 12. | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI | \$ | | |
| 13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | | | |
| 14. | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI | \$ | | |
| 15. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER | \$ | | |
| | | | | |

| MONETARY POLITICAL CONTRIBUTIONS SCHEDULE | | | | | |
|--|---|--|--|--|--|
| uction Guide explains how to complete | 1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/4 | | | | |
| isti Apartment Association Better Government | 3 Filer ID (Ethics Commission Filers) 00016609 | | | | |
| Full name of contributor | 7 Amount of Contribution (\$) \$35.00 | | | | |
| Corpus Christi, TX 78412 | | | | | |
| upation / Job title (See Instructions) | 9 Employer (See Inst | tructions) | | | |
| | | | | | |
| | isti Apartment Association Better Government 5 Full name of contributor out-of-state PA Embassy House 6 Contributor address; City; State; Zip Code | isti Apartment Association Better Government Fund 5 Full name of contributor out-of-state PAC (ID#: | | | |