

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)	\$ 6,732.96
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	\$ 237,715.35
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	\$ 6,732.96
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: 1/152 Rpt: 4/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	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 09/20/2024	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 09/06/2024	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 09/20/2024	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 09/06/2024	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: 2/152 Rpt: 5/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	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 09/06/2024	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 09/20/2024	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 09/06/2024	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 09/20/2024	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: 3/152 Rpt: 6/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	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 09/13/2024	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 09/06/2024	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 09/20/2024	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 09/06/2024	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: 4/152 Rpt: 7/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	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 08/30/2024	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 09/13/2024	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 09/06/2024	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 09/20/2024	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: 5/152 Rpt: 8/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	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 09/13/2024	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 08/30/2024	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 09/13/2024	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 08/30/2024	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: 6/152 Rpt: 9/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	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 09/06/2024	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 09/20/2024	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 09/06/2024	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 09/20/2024	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: 7/152 Rpt: 10/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bach, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Centreville, VA 20120	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		9 Employer (See Instructions) CMC Virginia
Date 09/20/2024	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 09/06/2024	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 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Teresa <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 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Teresa <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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/152 Rpt: 11/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	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 09/13/2024	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
Date 08/30/2024	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 09/13/2024	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 09/06/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/152 Rpt: 12/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	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 09/06/2024	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 09/20/2024	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 08/30/2024	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-VP (Branch)		Employer (See Instructions) The Prescott Companies Inc
Date 09/13/2024	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-VP (Branch)		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: 10/152 Rpt: 13/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyles III, Robert <hr/> 6 Contributor address; City; State; Zip Code Bordentown, NJ 08505	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Dir (Branch)		9 Employer (See Instructions) CMC NJ
Date 09/13/2024	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 08/30/2024	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-Dir (Branch)		Employer (See Instructions) Associa Colorado
Date 09/13/2024	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-Dir (Branch)		Employer (See Instructions) Associa Colorado
Date 08/30/2024	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: 11/152 Rpt: 14/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Robyn	7 Amount of Contribution (\$) \$11.00
	6 Contributor address; City; State; Zip Code Millbrook, IL 60536	
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Associa Chicagoland
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bricker, Shelly	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code Palm Desert, CA 92255	
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bricker, Shelly	Amount of Contribution (\$) \$3.00
	Contributor address; City; State; Zip Code Palm Desert, CA 92255	
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, P.	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Reston, VA 20191	
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) CMC Virginia
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, P.	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Reston, VA 20191	
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		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: 12/152 Rpt: 15/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, John <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75034	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) CIO		9 Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, John <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) CIO		Employer (See Instructions) Corporate Headquarters
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brokaw, Heather <hr/> Contributor address; City; State; Zip Code Lehigh Acres, FL 33974	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Gulf Coast Inc
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brokaw, Heather <hr/> Contributor address; City; State; Zip Code Lehigh Acres, FL 33974	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Gulf Coast Inc
Date 08/30/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/152 Rpt: 16/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Arthur	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Alpharetta, GA 30022	
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Homeside Properties
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buha, Colleen	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Waterford, MI 48329	
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Kramer Triad Management Group
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buha, Colleen	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Waterford, MI 48329	
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Kramer Triad Management Group
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bupp, Derek	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Brooklyn, NY 11215	
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Michelle	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Warminster, PA 18974	
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Mid Atlantic Management Corp

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/152 Rpt: 17/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Michelle <hr/> 6 Contributor address; City; State; Zip Code Warminster, PA 18974	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) General Mgr (I)		9 Employer (See Instructions) Mid Atlantic Management Corp
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnside, Michelle <hr/> Contributor address; City; State; Zip Code Mabank, TX 75147	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) HR-VP		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnside, Michelle <hr/> Contributor address; City; State; Zip Code Mabank, TX 75147	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) HR-VP		Employer (See Instructions) Corporate Headquarters
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Joseph <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 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burris, Joseph <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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/152 Rpt: 18/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byrd, Annette	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Ruskin, FL 33573		
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Associa Gulf Coast Inc
Date 09/13/2024	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
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, BYRON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PASADINA, MD 21122		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, BYRON	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code PASADINA, MD 21122		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 09/06/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/152 Rpt: 19/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Walter	7 Amount of Contribution (\$) \$9.00
6 Contributor address; City; State; Zip Code Virginia Beach, VA 23451		
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Community Group Inc
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caplan, Elisa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Roswell, GA 30075		
Principal occupation / Job title (See Instructions) VP of HR		Employer (See Instructions) Heritage Property Management Services LLC
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caplan, Elisa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Roswell, GA 30075		
Principal occupation / Job title (See Instructions) VP of HR		Employer (See Instructions) Heritage Property Management Services LLC
Date 08/30/2024	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
Date 09/13/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/152 Rpt: 20/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Ellen <hr/> 6 Contributor address; City; State; Zip Code Kailua, HI 96734	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Acctng-Mgr (Branch)		9 Employer (See Instructions) Associa Hawaii
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlos, Ellen <hr/> Contributor address; City; State; Zip Code Kailua, HI 96734	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Acctng-Mgr (Branch)		Employer (See Instructions) Associa Hawaii
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carona, Jeffrey <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Project Mgmt-Mgr		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carona, Jeffrey <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Project Mgmt-Mgr		Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/152 Rpt: 21/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	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 08/30/2024	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 09/13/2024	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 09/06/2024	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
Date 09/20/2024	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: 19/152 Rpt: 22/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassidy, Darrin <hr/> 6 Contributor address; City; State; Zip Code Round Hill, VA 20141	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) CMC Virginia
Date 09/20/2024	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 08/30/2024	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 09/13/2024	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 09/06/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/152 Rpt: 23/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	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 09/06/2024	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 09/20/2024	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 09/06/2024	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 09/20/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/152 Rpt: 24/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	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 09/20/2024	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 09/06/2024	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 09/20/2024	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 09/06/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/152 Rpt: 25/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Sasha	7 Amount of Contribution (\$) \$8.00
6 Contributor address; City; State; Zip Code Fowlerville, MI 48836		
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Land Arc Inc
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clausen, Sarah	Amount of Contribution (\$) \$14.00
Contributor address; City; State; Zip Code Allen, TX 75002		
Principal occupation / Job title (See Instructions) Communications-Dir		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clausen, Sarah	Amount of Contribution (\$) \$14.00
Contributor address; City; State; Zip Code Allen, TX 75002		
Principal occupation / Job title (See Instructions) Communications-Dir		Employer (See Instructions) Corporate Headquarters
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Gavin	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Atlanta, GA 30350		
Principal occupation / Job title (See Instructions) President and CEO		Employer (See Instructions) Heritage Property Management Services LLC
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Gavin	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Atlanta, GA 30350		
Principal occupation / Job title (See Instructions) President and CEO		Employer (See Instructions) Heritage Property Management Services LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/152 Rpt: 26/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobbs, Vandon	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Montpelier, VA 23192		
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Community Group Inc
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobbs, Vandon	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Montpelier, VA 23192		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Community Group Inc
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Norma	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Sugar Hill, GA 30518		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Homeside Properties
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Norma	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Sugar Hill, GA 30518		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Homeside Properties
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Paula	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Panama City, FL 32405		
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Burg Management Co Inc

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/152 Rpt: 27/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Paula <hr/> 6 Contributor address; City; State; Zip Code Panama City, FL 32405	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Community-VP (Branch)		9 Employer (See Instructions) Burg Management Co Inc
Date 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copenhaver, Alison <hr/> Contributor address; City; State; Zip Code Roswell, GA 30075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VP of Buisness Services and Operations		Employer (See Instructions) Heritage Property Management Services LLC
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copenhaver, Alison <hr/> Contributor address; City; State; Zip Code Roswell, GA 30075	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) VP of Buisness Services and Operations		Employer (See Instructions) Heritage Property Management Services LLC
Date 09/06/2024	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
Date 09/20/2024	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: 25/152 Rpt: 28/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crenshaw, Elias <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92120	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) N N Jaeschke Inc
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crosby II, Carnell <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48073	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Kramer Triad Management Group
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crosby II, Carnell <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48073	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Kramer Triad Management Group
Date 09/06/2024	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 09/20/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/152 Rpt: 29/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Christie	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Desert Hot Springs, CA 92240	
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Desert Resort Management
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis, Christie	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Desert Hot Springs, CA 92240	
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cvach, Joseph	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Clearwater, FL 33755	
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Gulf Coast Inc
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cvach, Joseph	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Clearwater, FL 33755	
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Gulf Coast Inc
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Ambruoso, Barbara	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Canton, GA 30115	
Principal occupation / Job title (See Instructions) Community-Mgr (I)		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: 27/152 Rpt: 30/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Ambruoso, Barbara <hr/> 6 Contributor address; City; State; Zip Code Canton, GA 30115	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Homeside Properties
Date 08/30/2024	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 09/13/2024	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 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, ANNA <hr/> Contributor address; City; State; Zip Code Brooklyn Park, MN 55428	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Associa Minnesota
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DUNN, ANNA <hr/> Contributor address; City; State; Zip Code Brooklyn Park, MN 55428	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		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: 28/152 Rpt: 31/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dahl, Dianne <hr/> 6 Contributor address; City; State; Zip Code Port Charlotte, FL 33954	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) Associa Gulf Coast Inc
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dahl, Dianne <hr/> Contributor address; City; State; Zip Code Port Charlotte, FL 33954	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Gulf Coast Inc
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dahlberg, Melinda <hr/> Contributor address; City; State; Zip Code Cambridge, MN 55008	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Cities Management Inc
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dahlberg, Melinda <hr/> Contributor address; City; State; Zip Code Cambridge, MN 55008	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Cities Management Inc
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Joshlyn <hr/> Contributor address; City; State; Zip Code Oak Point, TX 75068	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Implem-VP		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: 29/152 Rpt: 32/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniels, Joshlyn <hr/> 6 Contributor address; City; State; Zip Code Oak Point, TX 75068	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Implem-VP		9 Employer (See Instructions) Corporate Headquarters
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danys, Dorian <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34238	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) Associa Gulf Coast Inc
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danys, Dorian <hr/> Contributor address; City; State; Zip Code Sarasota, FL 34238	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) Associa Gulf Coast Inc
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De La Rosa, Andrew <hr/> Contributor address; City; State; Zip Code Hialeah, FL 33014	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Cust Serv-Mgr		Employer (See Instructions) Association Services of Florid
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De La Rosa, Andrew <hr/> Contributor address; City; State; Zip Code Hialeah, FL 33014	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Cust Serv-Mgr		Employer (See Instructions) Association Services of Florid

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/152 Rpt: 33/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeLeon, Patricia	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Carrollton, TX 75010		
8 Principal occupation / Job title (See Instructions) Acctng-Mgr-Sr		9 Employer (See Instructions) CSSC
Date 09/13/2024	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 09/06/2024	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
Date 09/20/2024	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
Date 09/06/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/152 Rpt: 34/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dehn, Jeanine	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Haymarket, VA 20169		
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) CMC Virginia
Date 08/30/2024	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 09/13/2024	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 09/06/2024	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 09/20/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/152 Rpt: 35/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Detar, Rachael	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code St. Clair Shores, MI 48081		
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Kramer Triad Management Group
Date 09/20/2024	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 08/30/2024	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
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodge, Jamie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Palm Desert, CA 92260		
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodge, Jamie	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Palm Desert, CA 92260		
Principal occupation / Job title (See Instructions) General Mgr (I)		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: 33/152 Rpt: 36/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodge, Mark	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Palm Desert, CA 92260		
8 Principal occupation / Job title (See Instructions) Ops-VP		9 Employer (See Instructions) Desert Resort Management
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodge, Mark	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Palm Desert, CA 92260		
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) Desert Resort Management
Date 09/06/2024	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 09/20/2024	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 Conroe, TX 77304		
Principal occupation / Job title (See Instructions) IT-Helpdesk-Lead		Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/152 Rpt: 37/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downs, Tracy <hr/> 6 Contributor address; City; State; Zip Code Laporte, TX 77571	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Houston Community Mgmt Service
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Downs, Tracy <hr/> Contributor address; City; State; Zip Code Laporte, TX 77571	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Houston Community Mgmt Service
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draghici, Mihaela <hr/> Contributor address; City; State; Zip Code Fairfax, VA 22030	Amount of Contribution (\$) \$0.25
Principal occupation / Job title (See Instructions) Acctant-Sr (III)		Employer (See Instructions) CMC Virginia
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draghici, Mihaela <hr/> Contributor address; City; State; Zip Code Fairfax, VA 22030	Amount of Contribution (\$) \$0.25
Principal occupation / Job title (See Instructions) Acctant-Sr (III)		Employer (See Instructions) CMC Virginia
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Tara <hr/> Contributor address; City; State; Zip Code Largo, FL 33773	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (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: 35/152 Rpt: 38/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Tara	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Largo, FL 33773		
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Associa Gulf Coast Inc
Date 08/30/2024	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
Date 09/13/2024	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
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durbin, Kenneth	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Glen Allen, VA 23060		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Community Group Inc
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durbin, Kenneth	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Glen Allen, VA 23060		
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: 36/152 Rpt: 39/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddy, Andrea	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Hilton Head Island, SC 29926		
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Atlantic States Management
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddy, Andrea	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Hilton Head Island, SC 29926		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Atlantic States Management
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eden Carona, Helen	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Dallas, TX 75225		
Principal occupation / Job title (See Instructions) CCO-Chief Corporate Officer		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eden Carona, Helen	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Dallas, TX 75225		
Principal occupation / Job title (See Instructions) CCO-Chief Corporate Officer		Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eggleston, Kelly	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Albuquerque, NM 87120		
Principal occupation / Job title (See Instructions) Community-VP (Branch)		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: 37/152 Rpt: 40/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eggleston, Kelly <hr/> 6 Contributor address; City; State; Zip Code Albuquerque, NM 87120	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-VP (Branch)		9 Employer (See Instructions) Canyon Gate Real Estate Servic
Date 09/06/2024	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
Date 09/20/2024	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
Date 08/30/2024	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 09/13/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/152 Rpt: 41/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enriquez, Maria <hr/> 6 Contributor address; City; State; Zip Code La Quinta, CA 92253	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) Desert Resort Management
Date 09/13/2024	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 09/05/2024	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 09/20/2024	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 09/06/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/152 Rpt: 42/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FULKES, LORIE <hr/> 6 Contributor address; City; State; Zip Code WINTER PARK, FL 32792	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Hara Community
Date 08/30/2024	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
Date 09/13/2024	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
Date 09/06/2024	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 09/20/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/152 Rpt: 43/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fazekas, Joseph <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78213	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Maint-Mgr		9 Employer (See Instructions) Associa Hill Country
Date 09/20/2024	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-Mgr		Employer (See Instructions) Associa Hill Country
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fazekas, Shawn <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) CSSC
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fazekas, Shawn <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) CSSC
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feldman, Michael <hr/> Contributor address; City; State; Zip Code Warren, NJ 07059	Amount of Contribution (\$) \$38.46
Principal occupation / Job title (See Instructions) CEO		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: 41/152 Rpt: 44/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felicione, Geraldine <hr/> 6 Contributor address; City; State; Zip Code Toms River, NJ 08755	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) MAMCO - Mid Atlantic
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felicione, Geraldine <hr/> Contributor address; City; State; Zip Code Toms River, NJ 08755	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 09/06/2024	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 09/20/2024	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 09/06/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/152 Rpt: 45/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Erica <hr/> 6 Contributor address; City; State; Zip Code Sparrows Point, MD 21219	7 Amount of Contribution (\$) \$13.00
8 Principal occupation / Job title (See Instructions) General Mgr (II)		9 Employer (See Instructions) CMC Virginia
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Erica <hr/> Contributor address; City; State; Zip Code Sparrows Point, MD 21219	Amount of Contribution (\$) \$13.00
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) CMC Virginia
Date 09/06/2024	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 09/20/2024	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 09/06/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/152 Rpt: 46/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foell, Kathryn	7 Amount of Contribution (\$) \$9.62
6 Contributor address; City; State; Zip Code The Colony, TX 75056		
8 Principal occupation / Job title (See Instructions) IT-Adminstr-VP-Sr		9 Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortin, Andrew	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Fort Meade, FL 33841		
Principal occupation / Job title (See Instructions) Govmt Affairs-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortin, Andrew	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Fort Meade, FL 33841		
Principal occupation / Job title (See Instructions) Govmt Affairs-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Jeff	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Project Mgmt-Dir		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Jeff	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Arlington, TX 76001		
Principal occupation / Job title (See Instructions) Project Mgmt-Dir		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: 44/152 Rpt: 47/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frangiosa, Theresa <hr/> 6 Contributor address; City; State; Zip Code Jeffersonville, PA 19403	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Admin-Asst		9 Employer (See Instructions) Mid Atlantic Management Corp
Date 09/13/2024	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 09/06/2024	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
Date 09/20/2024	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
Date 09/06/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/152 Rpt: 48/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Matthew <hr/> 6 Contributor address; City; State; Zip Code Madison Heights, MI 48071	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Code Enforc-Assc		9 Employer (See Instructions) Kramer Triad Management Group
Date 08/30/2024	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 09/13/2024	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 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galambos, Theresa <hr/> Contributor address; City; State; Zip Code Sterling, VA 20164	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Acctng-Dir (Branch)		Employer (See Instructions) CMC Virginia
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galambos, Theresa <hr/> Contributor address; City; State; Zip Code Sterling, VA 20164	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Acctng-Dir (Branch)		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: 46/152 Rpt: 49/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamiz, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Mansfield, TX 76063	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Marketing-Dir-Sr		9 Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamiz, Jennifer <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76063	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Marketing-Dir-Sr		Employer (See Instructions) Corporate Headquarters
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Jose <hr/> Contributor address; City; State; Zip Code St. Paul, TX 75098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) CSSC
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Jose <hr/> Contributor address; City; State; Zip Code St. Paul, TX 75098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) CSSC
Date 09/06/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/152 Rpt: 50/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gentry, Kara	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code Edmond, OK 73013	
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Neighborhood Services Corp
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Lori	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Saline, MI 48176	
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) Kramer Triad Management Group
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giles, Lori	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Saline, MI 48176	
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) Kramer Triad Management Group
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillman, Andrew	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Miami, FL 33138	
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Marquis
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillman, Andrew	Amount of Contribution (\$) \$2.50
	Contributor address; City; State; Zip Code Miami, FL 33138	
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Marquis

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/152 Rpt: 51/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	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 09/20/2024	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
Date 08/30/2024	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 09/13/2024	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 09/06/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/152 Rpt: 52/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Zachary <hr/> 6 Contributor address; City; State; Zip Code Hawkins, TX 75765	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) IT-Syss-Eng		9 Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	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 09/20/2024	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 08/30/2024	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 09/13/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/152 Rpt: 53/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grant, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Ewa Beach, HI 96706	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Associa Hawaii
Date 09/20/2024	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
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenwood, Lee <hr/> Contributor address; City; State; Zip Code Boston, MA 02124	Amount of Contribution (\$) \$48.00
Principal occupation / Job title (See Instructions) Govmt Affairs-VP		Employer (See Instructions) Evergreen Harvard Group LLC
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenwood, Lee <hr/> Contributor address; City; State; Zip Code Boston, MA 02124	Amount of Contribution (\$) \$48.00
Principal occupation / Job title (See Instructions) Govmt Affairs-VP		Employer (See Instructions) Evergreen Harvard Group LLC
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Dawn <hr/> Contributor address; City; State; Zip Code Chicago, IL 60640	Amount of Contribution (\$) \$2.00
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: 51/152 Rpt: 54/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greer, Dawn <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60640	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Associa Chicagoland
Date 09/06/2024	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 09/20/2024	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 09/06/2024	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 09/20/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/152 Rpt: 55/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	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 09/20/2024	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
Date 08/30/2024	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 (II)		Employer (See Instructions) CSSC
Date 09/13/2024	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 (II)		Employer (See Instructions) CSSC
Date 08/30/2024	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: 53/152 Rpt: 56/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAIRE-WILLIAMS, JESSICA <hr/> 6 Contributor address; City; State; Zip Code TEMECULA, CA 92592	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Regional)		9 Employer (See Instructions) The Prescott Companies Inc
Date 09/06/2024	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 09/20/2024	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 08/30/2024	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 09/13/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/152 Rpt: 57/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	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 09/20/2024	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
Date 08/30/2024	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 09/13/2024	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 08/30/2024	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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/152 Rpt: 58/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Ty	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Washington, DC 20009		
8 Principal occupation / Job title (See Instructions) Client Relat-Dir (Branch)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartmann, Lynne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Runnemede, NJ 08078		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartmann, Lynne	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Runnemede, NJ 08078		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hastings, Nancy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Barnegat, NJ 08005		
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) MAMCO - Mid Atlantic
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hastings, Nancy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Barnegat, NJ 08005		
Principal occupation / Job title (See Instructions) Ops-VP-Sr		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: 56/152 Rpt: 59/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hastings III, Robert <hr/> 6 Contributor address; City; State; Zip Code Barnegat, NJ 08005	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Regional)		9 Employer (See Instructions) MAMCO - Mid Atlantic
Date 09/13/2024	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) Ops-VP (Regional)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 09/06/2024	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 (\$) \$15.00
Principal occupation / Job title (See Instructions) Project Mgmt-VP		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	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 (\$) \$15.00
Principal occupation / Job title (See Instructions) Project Mgmt-VP		Employer (See Instructions) Corporate Headquarters
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Taylor <hr/> Contributor address; City; State; Zip Code Irma, SC 29063	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) RVP		Employer (See Instructions) CAMS

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/152 Rpt: 60/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Taylor <hr/> 6 Contributor address; City; State; Zip Code Irma, SC 29063	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) RVP		9 Employer (See Instructions) CAMS
Date 09/06/2024	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 (\$) \$4.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Cities Management Inc
Date 09/20/2024	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 (\$) \$4.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Cities Management Inc
Date 09/06/2024	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 (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Somerset Association Managemen
Date 09/20/2024	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 (\$) \$5.00
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: 58/152 Rpt: 61/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennessy, Joann	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Philadelphia, PA 19154		
8 Principal occupation / Job title (See Instructions) Admin-Asst		9 Employer (See Instructions) Mid Atlantic Management Corp
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennessy, Joann	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Philadelphia, PA 19154		
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Mid Atlantic Management Corp
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henrici, Sarah	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Edmond, OK 73013		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Neighborhood Services Corp
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henrici, Sarah	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Edmond, OK 73013		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Neighborhood Services Corp
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensley, John	Amount of Contribution (\$) \$11.00
Contributor address; City; State; Zip Code Franklin, KY 42134		
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Associa Tennessee

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/152 Rpt: 62/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensley, John	7 Amount of Contribution (\$) \$11.00
6 Contributor address; City; State; Zip Code Franklin, KY 42134		
8 Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		9 Employer (See Instructions) Associa Tennessee
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermogenes, Ma Carcel	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Springfield, VA 22151		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) CMC Virginia
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermogenes, Ma Carcel	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Springfield, VA 22151		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) CMC Virginia
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Michelle	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Belleville, NJ 07109		
Principal occupation / Job title (See Instructions) Rec-Dir		Employer (See Instructions) CMC NJ
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Michelle	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Belleville, NJ 07109		
Principal occupation / Job title (See Instructions) Rec-Dir		Employer (See Instructions) CMC NJ

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/152 Rpt: 63/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herring Jr., James <hr/> 6 Contributor address; City; State; Zip Code Richmond, VA 23233	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Community Group Inc
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herring Jr., James <hr/> Contributor address; City; State; Zip Code Richmond, VA 23233	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Community Group Inc
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hertzler, Rebecca <hr/> Contributor address; City; State; Zip Code Rock Hill, SC 29730	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Carolinas
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hertzler, Rebecca <hr/> Contributor address; City; State; Zip Code Rock Hill, SC 29730	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Carolinas
Date 09/06/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/152 Rpt: 64/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	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 09/06/2024	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 09/20/2024	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 08/30/2024	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
Date 09/13/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/152 Rpt: 65/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoang, Phung <hr/> 6 Contributor address; City; State; Zip Code Murrieta, CA 92563	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) The Prescott Companies Inc
Date 09/13/2024	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 08/30/2024	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 09/13/2024	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 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holguin, Sellah <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87121	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Canyon Gate Real Estate Servic

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/152 Rpt: 66/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	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 09/06/2024	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 09/20/2024	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 08/30/2024	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
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horndasch, Erica	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Wauconda, IL 60084		
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: 64/152 Rpt: 67/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horndasch, Erica <hr/> 6 Contributor address; City; State; Zip Code Wauconda, IL 60084	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Associa Chicagoland
Date 08/30/2024	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 09/13/2024	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 09/06/2024	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 09/20/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/152 Rpt: 68/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Scott	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Sacramento, CA 95822	
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Associa Northern California
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Scott	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Sacramento, CA 95822	
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Northern California
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Melanie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Hendersonville, NC 28739	
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) IPM Corp of Brevard Inc
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Melanie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Hendersonville, NC 28739	
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) IPM Corp of Brevard Inc
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Bryan	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Bountiful, UT 84010	
Principal occupation / Job title (See Instructions) Ops-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: 66/152 Rpt: 69/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Bryan <hr/> 6 Contributor address; City; State; Zip Code Bountiful, UT 84010	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Ops-VP-Sr		9 Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	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) President		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	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) President		Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	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 09/20/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/152 Rpt: 70/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Carl <hr/> 6 Contributor address; City; State; Zip Code Lawrenceville, GA 30045	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) VP of Property Management		9 Employer (See Instructions) Heritage Property Management Services LLC
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Carl <hr/> Contributor address; City; State; Zip Code Lawrenceville, GA 30045	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP of Property Management		Employer (See Instructions) Heritage Property Management Services LLC
Date 09/06/2024	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
Date 09/20/2024	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
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jennifer <hr/> Contributor address; City; State; Zip Code Marlton, NJ 08053	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		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: 68/152 Rpt: 71/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Marlton, NJ 08053	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Dir (Branch)		9 Employer (See Instructions) MAMCO - Mid Atlantic
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan <hr/> Contributor address; City; State; Zip Code White, GA 30184	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Acctng-Spec (II)		Employer (See Instructions) Homeside Properties
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan <hr/> Contributor address; City; State; Zip Code White, GA 30184	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Acctng-Spec (II)		Employer (See Instructions) Homeside Properties
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Deborah <hr/> Contributor address; City; State; Zip Code Somerville, MA 02144	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Dartmouth
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Deborah <hr/> Contributor address; City; State; Zip Code Somerville, MA 02144	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Dartmouth

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/152 Rpt: 72/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Janel <hr/> 6 Contributor address; City; State; Zip Code Ft. Worth, TX 76112	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) PMG North Texas
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Janel <hr/> Contributor address; City; State; Zip Code Ft. Worth, TX 76112	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) PMG North Texas
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Kelli <hr/> Contributor address; City; State; Zip Code BOISE, ID 83716	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Associations Equity
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Kelli <hr/> Contributor address; City; State; Zip Code BOISE, ID 83716	Amount of Contribution (\$) \$0.50
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Associations Equity
Date 08/30/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/152 Rpt: 73/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Marla <hr/> 6 Contributor address; City; State; Zip Code Holland, PA 18966	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Ops-Analyst-Sr		9 Employer (See Instructions) Mid Atlantic Management Corp
Date 09/06/2024	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 09/20/2024	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 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kehayias, Sofia <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22042	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (III)		Employer (See Instructions) CMC Virginia
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kehayias, Sofia <hr/> Contributor address; City; State; Zip Code Falls Church, VA 22042	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (III)		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: 71/152 Rpt: 74/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Marlo <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78748	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Somerset Association Managemen
Date 09/20/2024	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 08/30/2024	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 09/13/2024	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 08/30/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/152 Rpt: 75/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerwin, Heather <hr/> 6 Contributor address; City; State; Zip Code Ft. Collins, CO 80521	7 Amount of Contribution (\$) \$23.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Regional)		9 Employer (See Instructions) Associa Colorado
Date 08/30/2024	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.
Date 09/13/2024	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.
Date 09/06/2024	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) Property-Mgr-Asst		Employer (See Instructions) IPM Corp of Brevard Inc
Date 09/20/2024	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) Property-Mgr-Asst		Employer (See Instructions) IPM Corp of Brevard Inc

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/152 Rpt: 76/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	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 09/13/2024	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 09/06/2024	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
Date 09/20/2024	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
Date 09/06/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/152 Rpt: 77/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knoop, Danika	7 Amount of Contribution (\$) \$3.00
6 Contributor address; City; State; Zip Code The Colony, TX 75056		
8 Principal occupation / Job title (See Instructions) OPS-Dir-Corporate Dev		9 Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kraft, Meredith	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Union Bridge, MD 21791		
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) CMC Virginia
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kraft, Meredith	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Union Bridge, MD 21791		
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) CMC Virginia
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krueger, John	Amount of Contribution (\$) \$110.00
Contributor address; City; State; Zip Code McKinney, TX 75070		
Principal occupation / Job title (See Instructions) Govmt Affairs-VP		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krueger, John	Amount of Contribution (\$) \$110.00
Contributor address; City; State; Zip Code McKinney, TX 75070		
Principal occupation / Job title (See Instructions) Govmt Affairs-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: 75/152 Rpt: 78/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruppa, Brian	7 Amount of Contribution (\$) \$85.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75204	
8 Principal occupation / Job title (See Instructions) Chief Legal Officer		9 Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruppa, Brian	Amount of Contribution (\$) \$85.00
	Contributor address; City; State; Zip Code Dallas, TX 75204	
Principal occupation / Job title (See Instructions) Chief Legal Officer		Employer (See Instructions) Corporate Headquarters
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDELL, JASON	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Henderson, NV 89052	
Principal occupation / Job title (See Instructions) Ops-Dir		Employer (See Instructions) Associa Nevada South
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDELL, JASON	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Henderson, NV 89052	
Principal occupation / Job title (See Instructions) Ops-Dir		Employer (See Instructions) Associa Nevada South
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUSCOMBE, JILL	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Royal Oak, MI 48073	
Principal occupation / Job title (See Instructions) Acct Mgmt-Mgr		Employer (See Instructions) Land Arc Inc

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/152 Rpt: 79/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUSCOMBE, JILL <hr/> 6 Contributor address; City; State; Zip Code Royal Oak, MI 48073	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Acct Mgmt-Mgr		9 Employer (See Instructions) Land Arc Inc
Date 08/30/2024	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 09/13/2024	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 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lainez, Gita <hr/> 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 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lainez, Gita <hr/> 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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/152 Rpt: 80/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landrum, Vanessa	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Indio, CA 92203		
8 Principal occupation / Job title (See Instructions) Ops-Dir		9 Employer (See Instructions) Desert Resort Management
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landrum, Vanessa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Indio, CA 92203		
Principal occupation / Job title (See Instructions) Ops-Dir		Employer (See Instructions) Desert Resort Management
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laney, Robbi	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Raleigh, NC 27604		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) H.R.W. INC.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laney, Robbi	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Raleigh, NC 27604		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) H.R.W. INC.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanin-Trina, Michele	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Algonquin, IL 60102		
Principal occupation / Job title (See Instructions) Community-Pres (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: 78/152 Rpt: 81/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lanin-Trina, Michele <hr/> 6 Contributor address; City; State; Zip Code Algonquin, IL 60102	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Associa Chicagoland
Date 08/30/2024	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 (\$) \$22.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 09/13/2024	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 (\$) \$22.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 09/06/2024	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 09/20/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/152 Rpt: 82/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, David <hr/> 6 Contributor address; City; State; Zip Code Palm Desert, CA 92260	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Desert Resort Management
Date 09/13/2024	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 08/30/2024	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 09/13/2024	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 09/05/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/152 Rpt: 83/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lenau, Stacey <hr/> 6 Contributor address; City; State; Zip Code Vass, NC 28394	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Director of HR		9 Employer (See Instructions) CAMS
Date 08/30/2024	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
Date 09/13/2024	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
Date 09/05/2024	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 09/20/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/152 Rpt: 84/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Kimberly <hr/> 6 Contributor address; City; State; Zip Code Palm Desert, CA 92260	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Community-Mgr-Asst		9 Employer (See Instructions) Desert Resort Management
Date 09/13/2024	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 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Raul <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acctng-Supr		Employer (See Instructions) CSSC
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Raul <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acctng-Supr		Employer (See Instructions) CSSC
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lounsbury, Carolyn <hr/> Contributor address; City; State; Zip Code Sterling Heights, MI 48313	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-Dir		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: 82/152 Rpt: 85/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lounsbery, Carolyn <hr/> 6 Contributor address; City; State; Zip Code Sterling Heights, MI 48313	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Ops-Dir		9 Employer (See Instructions) Kramer Triad Management Group
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loya, Tammie <hr/> Contributor address; City; State; Zip Code Waxachie, TX 75165	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Acctng-Supr		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loya, Tammie <hr/> Contributor address; City; State; Zip Code Waxachie, TX 75165	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Acctng-Supr		Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	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 09/20/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/152 Rpt: 86/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magale, Gloria <hr/> 6 Contributor address; City; State; Zip Code Arlington, MA 02474	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) HR-Mgr		9 Employer (See Instructions) Dartmouth
Date 09/20/2024	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 08/30/2024	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 09/13/2024	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 08/30/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/152 Rpt: 87/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallory, Tammy <hr/> 6 Contributor address; City; State; Zip Code Panama City, FL 32404	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Burg Management Co Inc
Date 08/30/2024	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
Date 09/13/2024	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
Date 08/30/2024	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 09/13/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/152 Rpt: 88/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcou, Carol <hr/> 6 Contributor address; City; State; Zip Code Palatine, IL 60067	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) Associa Chicagoland
Date 09/13/2024	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 09/06/2024	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 09/20/2024	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 09/06/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/152 Rpt: 89/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Linda <hr/> 6 Contributor address; City; State; Zip Code Canton, MI 48188	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 09/06/2024	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
Date 09/20/2024	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
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marton, Sue <hr/> Contributor address; City; State; Zip Code Richmond, VA 23235	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Community Group Inc
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marton, Sue <hr/> Contributor address; City; State; Zip Code Richmond, VA 23235	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		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: 87/152 Rpt: 90/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martone, Nicole <hr/> 6 Contributor address; City; State; Zip Code Cliffside Park, NJ 07010	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) CMC NJ
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martone, Nicole <hr/> Contributor address; City; State; Zip Code Cliffside Park, NJ 07010	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) CMC NJ
Date 08/30/2024	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 09/13/2024	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 09/06/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/152 Rpt: 91/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathews, Darla	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Frisco, TX 75034		
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) PMG North Texas
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxfield, Joy	Amount of Contribution (\$) \$11.62
Contributor address; City; State; Zip Code Fort Worth, TX 76133		
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) PMG North Texas
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxfield, Joy	Amount of Contribution (\$) \$11.62
Contributor address; City; State; Zip Code Fort Worth, TX 76133		
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) PMG North Texas
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzarella, Nicholas	Amount of Contribution (\$) \$32.00
Contributor address; City; State; Zip Code Potomac Falls, VA 20165		
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) CMC Virginia
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzarella, Nicholas	Amount of Contribution (\$) \$32.00
Contributor address; City; State; Zip Code Potomac Falls, VA 20165		
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) CMC Virginia

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/152 Rpt: 92/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Robert	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Concord, MA 01742		
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Dartmouth
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Robert	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Concord, MA 01742		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Dartmouth
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClelland, Demetria	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Standish, MI 48658		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Kramer Triad Management Group
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCoy, Marc	Amount of Contribution (\$) \$21.00
Contributor address; City; State; Zip Code Nokesville, VA 20181		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCoy, Marc	Amount of Contribution (\$) \$21.00
Contributor address; City; State; Zip Code Nokesville, VA 20181		
Principal occupation / Job title (See Instructions) Community-Pres (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: 90/152 Rpt: 93/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Kim <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Acctng-VP		9 Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	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 08/30/2024	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) Community-Mgr-Asst		Employer (See Instructions) Houston Community Mgmt Service
Date 09/13/2024	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) Community-Mgr-Asst		Employer (See Instructions) Houston Community Mgmt Service
Date 08/30/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/152 Rpt: 94/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendez, Joanne	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Dallas, TX 75243		
8 Principal occupation / Job title (See Instructions) Acctng-Spec (I)		9 Employer (See Instructions) CSSC
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Cameron	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Fort Worth, TX 76133		
Principal occupation / Job title (See Instructions) Concierge-Sr		Employer (See Instructions) Somerset Association Managemen
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Cameron	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Fort Worth, TX 76133		
Principal occupation / Job title (See Instructions) Concierge-Sr		Employer (See Instructions) Somerset Association Managemen
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Kathleen	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Blaine, MN 55434		
Principal occupation / Job title (See Instructions) Escrow/Resale-Spec		Employer (See Instructions) Cities Management Inc
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Kathleen	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Blaine, MN 55434		
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: 92/152 Rpt: 95/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Daniel <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11218	7 Amount of Contribution (\$) \$12.00
8 Principal occupation / Job title (See Instructions) Property Manager		9 Employer (See Instructions) Choice NY Property Management
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Lori <hr/> Contributor address; City; State; Zip Code Fishers, IN 46038	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Maint-Coord		Employer (See Instructions) CASI
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Lori <hr/> Contributor address; City; State; Zip Code Fishers, IN 46038	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Maint-Coord		Employer (See Instructions) CASI
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Susan <hr/> Contributor address; City; State; Zip Code Corsicana, TX 75110	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ins-Acct Exec		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Susan <hr/> Contributor address; City; State; Zip Code Corsicana, TX 75110	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ins-Acct Exec		Employer (See Instructions) Corporate Headquarters

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/152 Rpt: 96/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	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 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller-Napue, Yolanda <hr/> Contributor address; City; State; Zip Code Minneapolis, MN 55409	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Associa Minnesota
Date 09/06/2024	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 09/20/2024	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 08/30/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/152 Rpt: 97/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Louise <hr/> 6 Contributor address; City; State; Zip Code Bacliff, TX 77518	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Houston Community Mgmt Service
Date 09/06/2024	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 09/20/2024	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 08/30/2024	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 09/13/2024	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.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/152 Rpt: 98/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Erica <hr/> 6 Contributor address; City; State; Zip Code Fulshear, TX 77441	7 Amount of Contribution (\$) \$14.00
8 Principal occupation / Job title (See Instructions) Bus Devolp-VP		9 Employer (See Instructions) Principal Mgmt Group Houston
Date 09/20/2024	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 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morin, JoAngela <hr/> Contributor address; City; State; Zip Code Anna, TX 75409	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Acctng-Dir (CSSC)		Employer (See Instructions) CSSC
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morin, JoAngela <hr/> Contributor address; City; State; Zip Code Anna, TX 75409	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Acctng-Dir (CSSC)		Employer (See Instructions) CSSC
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munoz, Gabriella <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75088	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Acctng-Banking Spec (I)		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: 96/152 Rpt: 99/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munoz, Gabriella <hr/> 6 Contributor address; City; State; Zip Code Rowlett, TX 75088	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Acctng-Banking Spec (I)		9 Employer (See Instructions) CSSC
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munoz, Karen <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75088	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Acctng-Mgr-Sr		Employer (See Instructions) CSSC
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munoz, Karen <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75088	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Acctng-Mgr-Sr		Employer (See Instructions) CSSC
Date 09/06/2024	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 09/20/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/152 Rpt: 100/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Carrie <hr/> 6 Contributor address; City; State; Zip Code Bluffton, SC 29910	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Client Acctng-Dir		9 Employer (See Instructions) Atlantic States Management
Date 09/20/2024	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 09/06/2024	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 09/20/2024	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 08/30/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/152 Rpt: 101/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mutothori, Penina <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75044	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Acctng-Spec (I)		9 Employer (See Instructions) CSSC
Date 08/30/2024	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) Ops-VP		Employer (See Instructions) Real Property Management
Date 09/06/2024	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 09/20/2024	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 09/06/2024	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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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/152 Rpt: 102/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, CHELSEA <hr/> 6 Contributor address; City; State; Zip Code Sachse, TX 75048	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) General Mgr (I)		9 Employer (See Instructions) PMG North Texas
Date 09/06/2024	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 09/20/2024	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 08/30/2024	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 09/13/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/152 Rpt: 103/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	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 09/13/2024	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 08/30/2024	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 09/13/2024	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 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neill, Lisa <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	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: 101/152 Rpt: 104/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	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 75206	7 Amount of Contribution (\$) \$11.00
8 Principal occupation / Job title (See Instructions) Controller		9 Employer (See Instructions) Corporate Headquarters
Date 08/30/2024	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 09/13/2024	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 08/30/2024	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 09/13/2024	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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/152 Rpt: 105/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oberthier, Claudia	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Carol Stream, IL 60188		
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Associa Arizona
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oberthier, Claudia	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Carol Stream, IL 60188		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Arizona
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliva, Vincent	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code Las Vegas, NV 89147		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Nevada South
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliva, Vincent	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code Las Vegas, NV 89147		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Nevada South
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orberg, Derrick	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Deland, FL 32724		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) CMP Orlando

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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	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 09/05/2024	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 09/20/2024	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 08/30/2024	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 09/13/2024	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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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PONGRATZ, PAMELA <hr/> 6 Contributor address; City; State; Zip Code CARLSBAD, CA 92010	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Ops-Analyst		9 Employer (See Instructions) The Prescott Companies Inc
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PONGRATZ, PAMELA <hr/> Contributor address; City; State; Zip Code CARLSBAD, CA 92010	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-Analyst		Employer (See Instructions) The Prescott Companies Inc
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Packard, Michael <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92009	Amount of Contribution (\$) \$31.00
Principal occupation / Job title (See Instructions) Bus Devolp-VP-Sr		Employer (See Instructions) Associa Northern California
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Packard, Michael <hr/> Contributor address; City; State; Zip Code Carlsbad, CA 92009	Amount of Contribution (\$) \$31.00
Principal occupation / Job title (See Instructions) Bus Devolp-VP-Sr		Employer (See Instructions) Associa Northern California
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearre, Michelle <hr/> Contributor address; City; State; Zip Code ljamsville, MD 21754	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Legum & Norman Realty Inc.

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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	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 09/06/2024	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 09/20/2024	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 08/30/2024	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 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Yolanda <hr/> 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

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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Yolanda <hr/> 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 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, James <hr/> 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 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, James <hr/> 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 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pesce, Michael <hr/> 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 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pesce, Michael <hr/> 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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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	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 09/20/2024	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 09/06/2024	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 09/20/2024	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 08/30/2024	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: 108/152 Rpt: 111/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pisano, Linda <hr/> 6 Contributor address; City; State; Zip Code Tampa, FL 33626	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Associa Gulf Coast Inc
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plescia, Mary <hr/> Contributor address; City; State; Zip Code North Hollywood, CA 91606	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) PCM California
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plescia, Mary <hr/> Contributor address; City; State; Zip Code North Hollywood, CA 91606	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) PCM California
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porras, Ruben <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75067	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porras, Ruben <hr/> Contributor address; City; State; Zip Code Lewisville, TX 75067	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/152 Rpt: 112/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	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 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poynter, Tammy <hr/> Contributor address; City; State; Zip Code Richmond, VA 23233	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Acctng-Spec (II)		Employer (See Instructions) Community Group Inc
Date 09/06/2024	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 09/20/2024	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 08/30/2024	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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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Michelle <hr/> 6 Contributor address; City; State; Zip Code Burlington, NJ 08016	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Finance-VP (Branch)		9 Employer (See Instructions) MAMCO - Mid Atlantic
Date 09/06/2024	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 09/20/2024	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 08/30/2024	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.
Date 09/13/2024	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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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radek, Karyn <hr/> 6 Contributor address; City; State; Zip Code Cary, IL 60013	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Associa Chicagoland
Date 09/13/2024	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 09/06/2024	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 09/20/2024	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 08/30/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/152 Rpt: 115/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Remillard, Reid	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Epping, NH 03042		
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Evergreen Harvard Group LLC
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Benjamin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Charlotte, NC 28226		
Principal occupation / Job title (See Instructions) SVP		Employer (See Instructions) CAMS
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Benjamin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Charlotte, NC 28226		
Principal occupation / Job title (See Instructions) SVP		Employer (See Instructions) CAMS
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richmond, Rachel	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code Houston, TX 77080		
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) Principal Mgmt Group Houston
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richmond, Rachel	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code Houston, TX 77080		
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) Principal Mgmt Group Houston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 113/152 Rpt: 116/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rieta, Tiffany	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Mililani, HI 96789		
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Associa Hawaii
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rieta, Tiffany	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Mililani, HI 96789		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Hawaii
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riska, Charles	Amount of Contribution (\$) \$55.00
Contributor address; City; State; Zip Code Plano, TX 75093		
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riska, Charles	Amount of Contribution (\$) \$55.00
Contributor address; City; State; Zip Code Plano, TX 75093		
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritter, Paula	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Reno, NV 89509		
Principal occupation / Job title (See Instructions) Acctng-Mgr (Branch)		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: 114/152 Rpt: 117/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	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 09/06/2024	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 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivas, Joseph <hr/> Contributor address; City; State; Zip Code McAllen, TX 78504	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Hill Country
Date 08/30/2024	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 09/06/2024	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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/152 Rpt: 118/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	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 09/20/2024	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 09/06/2024	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 09/20/2024	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 08/30/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/152 Rpt: 119/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	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 08/30/2024	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 09/13/2024	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 08/30/2024	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
Date 09/13/2024	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: 117/152 Rpt: 120/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rossi, Gina <hr/> 6 Contributor address; City; State; Zip Code Elwood, IL 60421	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Sales-Dir		9 Employer (See Instructions) Associa Chicagoland
Date 09/13/2024	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 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruff, Christine <hr/> Contributor address; City; State; Zip Code Chicago, IL 60609	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Associa Chicagoland
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruff, Christine <hr/> Contributor address; City; State; Zip Code Chicago, IL 60609	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Associa Chicagoland
Date 08/30/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/152 Rpt: 121/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	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 09/06/2024	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 09/20/2024	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 08/30/2024	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
Date 09/13/2024	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: 119/152 Rpt: 122/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SCRIMSHER, KARLA <hr/> 6 Contributor address; City; State; Zip Code Murrieta, CA 92563	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) The Prescott Companies Inc
Date 09/13/2024	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 09/06/2024	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 09/20/2024	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 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sands, Arielle <hr/> Contributor address; City; State; Zip Code Woodbridge, VA 22191	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Legum & Norman Realty Inc.

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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sands, Arielle <hr/> 6 Contributor address; City; State; Zip Code Woodbridge, VA 22191	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santangelo, Paula <hr/> Contributor address; City; State; Zip Code Norristown, PA 19403	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Mid Atlantic Management Corp
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santangelo, Paula <hr/> Contributor address; City; State; Zip Code Norristown, PA 19403	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Mid Atlantic Management Corp
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schemanske, Lisa <hr/> Contributor address; City; State; Zip Code South Lyon, MI 48178	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Kramer Triad Management Group
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schemanske, Lisa <hr/> Contributor address; City; State; Zip Code South Lyon, MI 48178	Amount of Contribution (\$) \$5.00
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: 121/152 Rpt: 124/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlapkohl, Tyler	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Farmer Branch, TX 75234		
8 Principal occupation / Job title (See Instructions) Ins-Sales Exec-Sr		9 Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlapkohl, Tyler	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Farmer Branch, TX 75234		
Principal occupation / Job title (See Instructions) Ins-Sales Exec-Sr		Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Christine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Rowlett, TX 75089		
Principal occupation / Job title (See Instructions) Marketing-VP		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Christine	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Rowlett, TX 75089		
Principal occupation / Job title (See Instructions) Marketing-VP		Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmitt, Laura	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code East Walpole, MA 02032		
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 09/20/2024	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 08/30/2024	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 09/13/2024	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 09/06/2024	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
Date 09/20/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/152 Rpt: 126/155
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4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Severance, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Maricopa, AZ 85138	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) HR-VP (Regional)		9 Employer (See Instructions) Associa Arizona
Date 09/13/2024	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 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sierra, Elizabeth <hr/> Contributor address; City; State; Zip Code Orlando, FL 32839	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) CMP Orlando
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sierra, Elizabeth <hr/> Contributor address; City; State; Zip Code Orlando, FL 32839	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) CMP Orlando
Date 09/06/2024	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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4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Robert	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Austin, TX 78758		
8 Principal occupation / Job title (See Instructions) Sales-VP		9 Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siouville, Andrew	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code Apex, NC 27539		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) H.R.W. INC.
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siouville, Andrew	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code Apex, NC 27539		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) H.R.W. INC.
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skelley, Stephanie	Amount of Contribution (\$) \$17.00
Contributor address; City; State; Zip Code La Grange, IL 60525		
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) Associa Chicagoland
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skelley, Stephanie	Amount of Contribution (\$) \$17.00
Contributor address; City; State; Zip Code La Grange, IL 60525		
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) Associa Chicagoland

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SCHEDULE A1

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4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slater, Erica <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77494	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Sales-Dir (Regional)		9 Employer (See Instructions) Houston Community Mgmt Service
Date 09/13/2024	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 08/30/2024	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 09/13/2024	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 08/30/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/152 Rpt: 129/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	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 09/06/2024	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 09/20/2024	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 09/06/2024	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 09/20/2024	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/152 Rpt: 130/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	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 09/13/2024	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 09/06/2024	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 09/20/2024	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 09/06/2024	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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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/152 Rpt: 131/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	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 09/06/2024	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 08/30/2024	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 09/13/2024	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 08/30/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/152 Rpt: 132/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	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 09/06/2024	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 09/20/2024	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 09/06/2024	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 09/20/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/152 Rpt: 133/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Kevin <hr/> 6 Contributor address; City; State; Zip Code Livonia, MI 48154	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 09/20/2024	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 08/30/2024	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 09/13/2024	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 08/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swain, Rebecca <hr/> Contributor address; City; State; Zip Code Villa Rica, GA 30180	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) VP of Property Management		Employer (See Instructions) Heritage Property Management Services LLC

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/152 Rpt: 134/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swain, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Villa Rica, GA 30180	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) VP of Property Management		9 Employer (See Instructions) Heritage Property Management Services LLC
Date 09/06/2024	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 09/20/2024	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 08/30/2024	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
Date 09/13/2024	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: 132/152 Rpt: 135/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabanou, Sue	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Tomball, TX 77375		
8 Principal occupation / Job title (See Instructions) Rec-Dir		9 Employer (See Instructions) Principal Mgmt Group Houston
Date 09/20/2024	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 09/06/2024	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 09/20/2024	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 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tapia, Paula	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Palm Desert, CA 92261		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		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: 133/152 Rpt: 136/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	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 09/06/2024	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 09/20/2024	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 08/30/2024	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
Date 09/13/2024	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: 134/152 Rpt: 137/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teonchuk, Jon <hr/> 6 Contributor address; City; State; Zip Code Richmond, VA 23235	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) Community Group Inc
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teonchuk, 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 09/06/2024	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 09/20/2024	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 09/06/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/152 Rpt: 138/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teran, Isabel	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Houston, TX 77088		
8 Principal occupation / Job title (See Instructions) Admin-Asst		9 Employer (See Instructions) Principal Mgmt Group Houston
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Carol	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Richardson, TX 75081		
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Carol	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Richardson, TX 75081		
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thermidor, Jackie	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Parlin, NJ 08859		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) CMC NJ
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thermidor, Jackie	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Parlin, NJ 08859		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) CMC NJ

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/152 Rpt: 139/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thigpen, Helen <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Legal-VP		9 Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	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 09/06/2024	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 09/20/2024	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 08/30/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/152 Rpt: 140/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Melisa <hr/> 6 Contributor address; City; State; Zip Code Rancho Mirage, CA 92270	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Desert Resort Management
Date 08/30/2024	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
Date 09/13/2024	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
Date 09/06/2024	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 09/20/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/152 Rpt: 141/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Alexandra <hr/> 6 Contributor address; City; State; Zip Code Palmetto, FL 34221	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Sales-VP		9 Employer (See Instructions) Associa Gulf Coast Inc
Date 09/13/2024	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 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urrutia, Jeanette <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Maint-Custodian		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urrutia, Jeanette <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Maint-Custodian		Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Jaime <hr/> Contributor address; City; State; Zip Code Gainesville, VA 20155	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) Ops-Analyst-Sr		Employer (See Instructions) CMC Virginia

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/152 Rpt: 142/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Jaime <hr/> 6 Contributor address; City; State; Zip Code Gainesville, VA 20155	7 Amount of Contribution (\$) \$11.00
8 Principal occupation / Job title (See Instructions) Ops-Analyst-Sr		9 Employer (See Instructions) CMC Virginia
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Horn, Dominick <hr/> Contributor address; City; State; Zip Code Shamong, NJ 08088	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Field Serv-Dir		Employer (See Instructions) MAMCO - Mid Atlantic
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Horn, Dominick <hr/> Contributor address; City; State; Zip Code Shamong, NJ 08088	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Field Serv-Dir		Employer (See Instructions) MAMCO - Mid Atlantic
Date 09/06/2024	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 09/20/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 140/152 Rpt: 143/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varghese, Rinu <hr/> 6 Contributor address; City; State; Zip Code Rockwall, TX 75087	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) IT-Adminstr-VP		9 Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	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 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veazey, Amanda <hr/> Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Mgmt-Dir		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veazey, Amanda <hr/> Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Project Mgmt-Dir		Employer (See Instructions) Corporate Headquarters
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veinot, Rachel <hr/> Contributor address; City; State; Zip Code Woodstock, GA 30188	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Project Mgmt-Mgr		Employer (See Instructions) Homeside Properties

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 141/152 Rpt: 144/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veinot, Rachel <hr/> 6 Contributor address; City; State; Zip Code Woodstock, GA 30188	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Project Mgmt-Mgr		9 Employer (See Instructions) Homeside Properties
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velazquez Jr., Orlando <hr/> Contributor address; City; State; Zip Code Pembroke Pines, FL 33027	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) General Mgr (III)		Employer (See Instructions) Marquis
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velazquez Jr., Orlando <hr/> Contributor address; City; State; Zip Code Pembroke Pines, FL 33027	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) General Mgr (III)		Employer (See Instructions) Marquis
Date 08/30/2024	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 09/13/2024	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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/152 Rpt: 145/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Voegele, Christen <hr/> 6 Contributor address; City; State; Zip Code Warminster, PA 18974	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Ops-Dir (Branch)		9 Employer (See Instructions) Mid Atlantic Management Corp
Date 09/13/2024	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 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, KIMBERLY <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22304	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, KIMBERLY <hr/> Contributor address; City; State; Zip Code ALEXANDRIA, VA 22304	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 08/30/2024	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.

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/152 Rpt: 146/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, DEBORAH <hr/> 6 Contributor address; City; State; Zip Code LEWES, DE 19958	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) General Mgr (I)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 09/05/2024	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 09/20/2024	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
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Vickie <hr/> Contributor address; City; State; Zip Code Plano, TX 75086	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Acctng-Spec (II)		Employer (See Instructions) CSSC
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Vickie <hr/> Contributor address; City; State; Zip Code Plano, TX 75086	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Acctng-Spec (II)		Employer (See Instructions) CSSC

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/152 Rpt: 147/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Darci	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Blaine, MN 55449		
8 Principal occupation / Job title (See Instructions) Community-Dir (Branch)		9 Employer (See Instructions) Cities Management Inc
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Darci	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Blaine, MN 55449		
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Cities Management Inc
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wait, Morgan	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Euless, TX 76040		
Principal occupation / Job title (See Instructions) Database-Assc		Employer (See Instructions) CSSC
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wait, Morgan	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Euless, TX 76040		
Principal occupation / Job title (See Instructions) Database-Assc		Employer (See Instructions) CSSC
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waitt, Debra	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Derry, NH 03038		
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Evergreen Harvard Group LLC

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/152 Rpt: 148/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waitt, Debra	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Derry, NH 03038		
8 Principal occupation / Job title (See Instructions) Admin-Asst		9 Employer (See Instructions) Evergreen Harvard Group LLC
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Jordyn	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Albertville, MN 55301		
Principal occupation / Job title (See Instructions) Ops-Mgr		Employer (See Instructions) Cities Management Inc
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Jordyn	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Albertville, MN 55301		
Principal occupation / Job title (See Instructions) Ops-Mgr		Employer (See Instructions) Cities Management Inc
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallis, Clint	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
Principal occupation / Job title (See Instructions) Real Estate-VP		Employer (See Instructions) Corporate Headquarters
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallis, Clint	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Flower Mound, TX 75028		
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: 146/152 Rpt: 149/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walter, Trevor <hr/> 6 Contributor address; City; State; Zip Code The Colony, TX 75056	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Acctant-Sr (III)		9 Employer (See Instructions) CSSC
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walter, Trevor <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Acctant-Sr (III)		Employer (See Instructions) CSSC
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, John <hr/> Contributor address; City; State; Zip Code Cathedral City, CA 92234	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, John <hr/> Contributor address; City; State; Zip Code Cathedral City, CA 92234	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 08/30/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 147/152 Rpt: 150/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/13/2024	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 08/30/2024	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 09/13/2024	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 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wecksler, 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
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wecksler, 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: 148/152 Rpt: 151/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiger, Vikki	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Canton, GA 30115		
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Homeside Properties
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiger, Vikki	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Canton, GA 30115		
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Homeside Properties
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Kevin	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Sewell, NJ 08080		
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) MAMCO - Mid Atlantic
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Kevin	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Sewell, NJ 08080		
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) MAMCO - Mid Atlantic
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Sean	Amount of Contribution (\$) \$59.62
Contributor address; City; State; Zip Code Grapevine, TX 76051		
Principal occupation / Job title (See Instructions) Sales-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: 149/152 Rpt: 152/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	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 08/30/2024	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 09/13/2024	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 08/30/2024	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
Date 09/13/2024	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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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/152 Rpt: 153/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiltshire, Heather <hr/> 6 Contributor address; City; State; Zip Code San Diego, CA 92115	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) N N Jaeschke Inc
Date 09/13/2024	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 09/06/2024	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 09/20/2024	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 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wojczak, Amanda <hr/> Contributor address; City; State; Zip Code Keller, TX 76248	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Chief HR 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: 151/152 Rpt: 154/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wojczak, Amanda <hr/> 6 Contributor address; City; State; Zip Code Keller, TX 76248	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Chief HR Officer		9 Employer (See Instructions) Corporate Headquarters
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Jessica <hr/> Contributor address; City; State; Zip Code Port Angeles, WA 98362	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Blue Mountain Community Mgmt L
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wood, Jessica <hr/> Contributor address; City; State; Zip Code Port Angeles, WA 98362	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Blue Mountain Community Mgmt L
Date 09/06/2024	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 09/20/2024	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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/152 Rpt: 155/155
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 08/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Laura <hr/> 6 Contributor address; City; State; Zip Code Colorado Springs, CO 80908	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Associa Colorado
Date 09/13/2024	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 09/06/2024	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 09/05/2024	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 09/20/2024	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