#### FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015762 3 COMMITTEE NAME **OFFICE USE ONLY** Apartment Association of Tarrant County Political Action Committee Date Received **ELECTRONICALLY FILED** 10/25/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 860 Airport Freeway Date Hand-delivered or Date Postmarked Suite 101 Change of Address Hurst, TX 76054 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST ΜI **TREASURER** Mr. Kevin NAME NICKNAME LAST **SUFFIX** Pellegrino STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 860 Airport Freeway STREET **ADDRESS** Suite 101 (Residence or Business) Hurst, TX 76054 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 860 Airport Fwy #101 MAILING **ADDRESS** Hurst, TX 76054 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (817) 284-1121 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 09/27/2024 10/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID (Ethics Commission Filers)							
Apartment Association	Apartment Association of Tarrant County Political Action Committee  4 COMMITTEE  1. Candidates  A. Supported John McQueeney State Repre							
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	sentative						
(Attach lists on plain paper to complete this report if necessary.)								
	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	\$	0.00						
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,100.00				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00				
	4. TOTAL POLITICA	\$	5,000.00					
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	DAY \$	141,144.72					
OUTSTANDING LOAN TOTALS	I .	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00				
16 AFFIDAVIT								
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.						
	Pellegrino							
		Signature of Cal	mpaign Treasu	ırer				
AFFIX NOTARY	STAMP / SEAL ABOVE							
		, tł	nis the	day				
of	, 20, to certify v	which, witness my hand and seal of office.						
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of office	cer administering oath				

### **GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE**

### FORM GPAC **ADDENDUM**

		Page 3 01 6
		13 Filer ID (Ethics Commission Filers)
of Tarrant County Po	litical Action Committee	00015762
(Identify by name or, if		tive
	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.)		
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	
Officeholders     Assisted     (Identify by name or, if	Phil King State Senator	
	1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders     Assisted (Identify by name or, if applicable, classify by party.)  1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders     Assisted (Identify by name or, if	(Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  A. Supported  A. Supported  B. Opposed  A. Supported  B. Opposed  B. Opposed  3. Officeholders Assisted  A. Supported  B. Opposed  B. Opposed  Phil King State Senator  Phil King State Senator

### **SUBTOTALS - GPAC**

## FORM **GPAC**COVER SHEET PG 3

			4 of 6							
17 COMMIT	TEE NAME ent Association of Tarrant County Political Action Committee	<b>18</b> Filer ID 00015762	(Ethics Commission Filers)							
	JLE SUBTOTALS F SCHEDULE		SUBTOTAL AMOUNT							
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,100.00								
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS									
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS									
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION									
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION									
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$							
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$							
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$							
9.	SCHEDULE E: LOANS		\$							
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 5,000.00							
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$							
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$							
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$							
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$							
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$							
I										

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	1	Total pages Schedule A1: Sch: 1/1 Rpt: 5/6			
2	FILER NAME Apartment A	ssociation of Tarrant County Political Action Comm	3	Filer ID (Ethics Commission Filers) 00015762			
4	Date 10/03/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#: McColm, William</li> <li>Contributor address; City; State; Zip Code</li> </ul>	7	Amount of Contribution (\$) \$1,100.00			
8	Principal occu	Forney, TX 75126  I occupation / Job title (See Instructions)  9 Employer (See Instruction Action Construction					

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage Expens
Contributions/ Donations Made By - Giff(Alwards/Memorials

Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment				Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)					
	oreal oural ayment		The	Instruction Guid	le explains hov	v to coi	mple	te this form.					
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics	Commission Filers)	
	Sch: 1/1 Rpt: 6/6		Apartment Association of Tarrant County Political Action							00015762	2		
4	Date	5	Payee name										
	10/15/2024		Kerwin, Helen										
6	Amount (\$)	7	Payee address;	City;	State; Z	ip Co	de						
	\$1,500.00		420 Grand Avenue										
	Expenditure from corporate funds		Glen Rose, TX	76043									
8	PURPOSE	(a)	Category (See Ca	tenories listed at the	ton of this schedul	(e)	(b)	Description					_
OF			Contributions/E				`	Check if travel	outsi	de of Texas. Co	mplete Sch	edule T.	
	EXPENDITURE		Candidate/Office		•	ee		Check if Austin	ı, TX,	officeholder liv	ing expense		
								HD 58 campa	aigr	n contribut	on		
9	Complete ONLY if direct		Candidate/Officeh	older name	Offic	ce sou	ght			Office	held		
	expenditure to benefit C/O	<sup>H</sup>	Kerwin, Helen		Stat	te Rep	ores	entative Distr	ict !	58 None			
	Date		Payee name										
	10/09/2024		King, Phil										
	Amount (\$)		Payee address;	City;	State; Z	ip Co	de						
	\$1,000.00		P.O. Box 1913										
	Expenditure from corporate funds		Weatherford, T	X 76086									
	PURPOSE	(a)	Category (See Ca	tegories listed at the	top of this schedul	le)	(b)	Description					_
	OF EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense 2024 SD 10 campaign donation							edule T.			
	LXFLINDITORL									!			
20									cam	ıpaıgn dor	ation		
	Operation ONLY if allowed	<u> </u>	2 1: -1 - + - 10#: 1-	.   .	04.		14			O#:	l I -I		_
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeh King, Phil (Sen.)	older name		ce sou	_	r District 10		Office		District 10	
			(Sen.)		Siai	le Sei	ιαιυ	DISTRICT 10		State	Seriator	DISTRICT 10	_
	Date		Payee name										
	10/10/2024		McQueeney, Jo	ohn									
	Amount (\$)		Payee address;	City;	State; Z	ip Co	de						
	\$2,500.00		P.O. Box 1004	58									
_	T Expenditure from												
	corporate funds		Fort Worth, TX	76185									
	PURPOSE	(a)	Category (See Ca	tegories listed at the	top of this schedul	le)	(b)	Description					
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  HD 97 campaign contribution											
									!				
								ווש זו נמווףני	aıyı	i continut	UII		
	Complete ONLY if direct	Ц	Candidate/Officeh	older namo	Offic	ce sou	aht			Office	hold		
	expenditure to benefit C/O		Januluale/Officeri McQueeney, Jol				_	entative Distr	rict (		iiciu		
		- '	wicqueeriey, 30i				0103	CHANGE DISH	101	- NOTIC			