FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00027574 3 COMMITTEE NAME **OFFICE USE ONLY** The Real Estate Council of Austin, Inc. Good Government PAC Date Received **ELECTRONICALLY FILED** 12/30/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 98 San Jacinto Blvd., Ste. 510 Change of Address Austin, TX 78701 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Dianne NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Bangle CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 98 San Jacinto Blvd., Ste 50 STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 98 San Jacinto Blvd., Ste 50 MAILING **ADDRESS** Change of Address Austin, TX 78701 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 320-4151 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY X January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 11/26/2024 12/25/2024

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME				13 File		(Ethics Commission Filers)
The Real Estate Counc	il of Austin, Inc. Good (Government PAC		000	27574	
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported				
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	0. Management	A Cupported				
	Measures (Describe by date and location	A. Supported				
	of election and nature of issue.)					
		B. Opposed				
	3. Officeholders					
	Assisted (Identify by name or, if applicable, classify by party.)					
5 CONTRIBUTION	1. TOTAL UNITEMIZE	D POLITICAL CON	TRIBUTIONS (OTHER TH	IAN	1	
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	OR GUARANTEES IADE ELECTRONI	S OF LOANS, OR CALLY)		\$	0.00
	2. TOTAL POLITICA				\$	222.50
	(OTHER THAN PLEI	DGES, LOANS, OF	GUARANTEES OF LOAN	NS)	9	820.52
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPE	ENDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDITUR	ES		\$	6,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING		MAINTAINED AS OF THE	LAST DAY	\$	1,759.74
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE I		OUTSTANDING LOANS A	AS OF THE	\$	0.00
.6 AFFIDAVIT	1				l	
		true	ear, or affirm, under penalt and correct and includes a er Title 15, Election Code.	iy of perjury, th all information I	at the ac equired	ccompanying report is to be reported by me
			Ms	s. Dianne Bar	ngle	
			Signature	e of Campaign	Treasur	er
AFFIX NOTARY	STAMP / SEAL ABOVE					
Sworn to and subscribed	before me. by the said			. this the		day
	_, 20, to certify \			,		
Signature of officer ad	ministering oath	Printed name of of	ficer administering oath	Title	of office	er administering oath

SUBTOTALS - MPAC

FORM MPAC **COVER SHEET PG 3**

3 of 7					
17 COMMITTI The Real	(Ethics Commission Filers)				
19 SCHEDUL NAME OF	SUBTOTAL AMOUNT				
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$			
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$			
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	\$			
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	\$			
6. X	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$ 74.94		
7. X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$ 745.58			
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$		
9.	SCHEDULE E: LOANS		\$		
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 6,000.00		
11.	11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS				
12.	12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS				
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
14. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$ 135.75		
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$		

MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

	The Instruction Guide explains how to complete this form.			1	Total pages Schedule C3: Sch: 1/1 Rpt: 4/7		
2	FILER NAME The Real Estate Council of Austin, Inc. Good Government PAC		3	Filer ID 00027574	(Ethics Commission Filers)		
4	Date	5	Corporation / Labor Organization name	6	Amount (\$)		
	11/30/2024		RECA				74.94

NON-MONETARY SUPPORT FROM CORPORATION SCHEDULE C4 **OR LABOR ORGANIZATION** 1 Total pages Schedule C4: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 5/7 2 FILER NAME 3 Filer ID (Ethics Commission Filers) The Real Estate Council of Austin, Inc. Good Government PAC 00027574 5 Corporation / Labor Organization name 6 Amount (\$) 12/25/2024 **RECA** 745.58

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Contributions/ Donations Candidate/Officeholde Credit Card Payment	
1 Total pages Schedul	e F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 6	7 The Real Estate Council of Austin, Inc. Good Government 00027574
4 Date	5 Payee name
12/10/2024	John Bucy Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$50	0.00 PO Box 536
Expenditure from corporate funds	Austin, TX 78767
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Contribution to campaign for State Representative District 136
9 Complete ONLY if di	
expenditure to benef	I C/OH
Date	Payee name
12/10/2024	Texas Senate Leadership Fund
Amount (\$)	Payee address; City; State; Zip Code
\$5,00	0.00 1E Greenway Plaza
	Ste 225
Expenditure from corporate funds	Houston, TX 77046
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	to support GOP Senators
Complete <u>ONLY</u> if di expenditure to benef	· · · · · · · · · · · · · · · · · · ·
'	
Date	Payee name
12/10/2024	Troxclair for Texas
Amount (\$)	Payee address; City; State; Zip Code
\$50	0.00 701 Hwy 281
Expenditure from	Suite H #196
corporate funds	Marble Falls, TX 78654
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	District 19
Complete ONLY if di	
expenditure to benef	it C/OH

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

	MADE FROM F	POLITICAL CONTRIBUTIONS
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule I: Sch: 1/1 Rpt: 7/7	2 FILER NAME The Real Estate Council of Austin, Inc. Good 3 Filer ID (Ethics Commission Filers) 00027574
4	Date 12/12/2024	5 Payee name Intuit
6	Amount (\$) 88.12 Expenditure from	7 Payee Address; City; State; Zip PO Box 2981 Phoenix, AZ 85026
В	corporate funds PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required.) Check Order
	Date 12/13/2024	Payee name Intuit
	Amount (\$) 47.63 Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 2981 Phoenix, AZ 85026
	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required.) Check Envelopes
		•