

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)	\$ 9,018.90
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	\$ 315,871.37
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	\$ 9,018.90
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: 1/154 Rpt: 4/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	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 02/20/2026	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 02/06/2026	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) Community-Dir (Branch)		Employer (See Instructions) Community Group Inc
Date 02/20/2026	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) Community-Dir (Branch)		Employer (See Instructions) Community Group Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akpan, Caleb	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Dallas, TX 75252		
Principal occupation / Job title (See Instructions) Copywriter		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: 2/154 Rpt: 5/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akpan, Caleb <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75252	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Copywriter		9 Employer (See Instructions) Corporate Headquarters
Date 02/06/2026	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 02/20/2026	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 01/30/2026	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 02/13/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/154 Rpt: 6/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Keli	7 Amount of Contribution (\$) \$3.50
	6 Contributor address; City; State; Zip Code Raleigh, NC 27604	
8 Principal occupation / Job title (See Instructions) Community-Dir (Branch)		9 Employer (See Instructions) H.R.W. INC.
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Keli	Amount of Contribution (\$) \$3.50
	Contributor address; City; State; Zip Code Raleigh, NC 27604	
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) H.R.W. INC.
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Tabitha	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Manassas Park, VA 20111	
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) CMC Virginia
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen, Tabitha	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Manassas Park, VA 20111	
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) CMC Virginia
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Brett	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code Columbus, OH 43229	
Principal occupation / Job title (See Instructions) HR-Mgr		Employer (See Instructions) Real Property Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/154 Rpt: 7/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Brett <hr/> 6 Contributor address; City; State; Zip Code Columbus, OH 43229	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) HR-Mgr		9 Employer (See Instructions) Real Property Management
Date 02/06/2026	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 (\$) \$7.00
Principal occupation / Job title (See Instructions) Finance-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	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 (\$) \$7.00
Principal occupation / Job title (See Instructions) Finance-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	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 02/13/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/154 Rpt: 8/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arterbury, James <hr/> 6 Contributor address; City; State; Zip Code Marrietta, GA 30066	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Homeside Properties
Date 02/13/2026	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 01/30/2026	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 (\$) \$6.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 02/13/2026	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 (\$) \$6.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bablo, Alicia <hr/> Contributor address; City; State; Zip Code Painted Post, NY 14870	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-Mgr		Employer (See Instructions) Community Association Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/154 Rpt: 9/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bablo, Alicia <hr/> 6 Contributor address; City; State; Zip Code Painted Post, NY 14870	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Ops-Mgr		9 Employer (See Instructions) Community Association Mgmt Svc
Date 02/06/2026	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 02/20/2026	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 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Leslie <hr/> Contributor address; City; State; Zip Code Tiki Island, TX 77554	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baldwin, Leslie <hr/> Contributor address; City; State; Zip Code Tiki Island, TX 77554	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Sales-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: 7/154 Rpt: 10/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barfield, Natalie <hr/> 6 Contributor address; City; State; Zip Code Myrtle Beach, SC 29575	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Waccamaw Management Inc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barfield, Natalie <hr/> Contributor address; City; State; Zip Code Myrtle Beach, SC 29575	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Waccamaw Management Inc
Date 01/26/2026	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 02/06/2026	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 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baskin, Dmitriy <hr/> Contributor address; City; State; Zip Code Freehold, NJ 07728	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/154 Rpt: 11/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Mandi <hr/> 6 Contributor address; City; State; Zip Code Tucson, AZ 85742	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Community-Mgr-Asst		9 Employer (See Instructions) AAM LLC
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Mandi <hr/> Contributor address; City; State; Zip Code Tucson, AZ 85742	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Community-Mgr-Asst		Employer (See Instructions) AAM LLC
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Teressa <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Organizational Dev-Mgr		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bates, Teressa <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Organizational Dev-Mgr		Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Best-Jones, Sydney <hr/> Contributor address; City; State; Zip Code Wilmington, NC 28405	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Marketing-Dir		Employer (See Instructions) Community Association Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/154 Rpt: 12/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Best-Jones, Sydney	7 Amount of Contribution (\$) \$8.00
	6 Contributor address; City; State; Zip Code Wilmington, NC 28405	
8 Principal occupation / Job title (See Instructions) Marketing-Dir		9 Employer (See Instructions) Community Association Mgmt Svc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomer, Lisa	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code Alexandria, KY 41001	
Principal occupation / Job title (See Instructions) Onsite Manager		Employer (See Instructions) Community Management Solutions
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloomer, Lisa	Amount of Contribution (\$) \$6.00
	Contributor address; City; State; Zip Code Alexandria, KY 41001	
Principal occupation / Job title (See Instructions) Onsite Manager		Employer (See Instructions) Community Management Solutions
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boeck, Michelle	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code North Branch, MN 55056	
Principal occupation / Job title (See Instructions) HR-Mgr (Regional)		Employer (See Instructions) Cities Management Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boeck, Michelle	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code North Branch, MN 55056	
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: 10/154 Rpt: 13/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boesen, Paige <hr/> 6 Contributor address; City; State; Zip Code Sparks, NV 89431	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) Associa Sierra North
Date 02/20/2026	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 01/30/2026	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 02/13/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bossert, Ronda <hr/> Contributor address; City; State; Zip Code Awendaw, SC 29429	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Community Association Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/154 Rpt: 14/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bossert, Ronda	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Awendaw, SC 29429		
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Community Association Mgmt Svc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bramlett, Matthew	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Henderson, CO 80640		
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Associa Colorado
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bramlett, Matthew	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Henderson, CO 80640		
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Associa Colorado
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Robyn	Amount of Contribution (\$) \$11.00
Contributor address; City; State; Zip Code Millbrook, IL 60536		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Chicagoland
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braun, Robyn	Amount of Contribution (\$) \$11.00
Contributor address; City; State; Zip Code Millbrook, IL 60536		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Chicagoland

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/154 Rpt: 15/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breuer, Heather	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Albertville, MN 55301		
8 Principal occupation / Job title (See Instructions) Community-Dir (Branch)		9 Employer (See Instructions) Associa Minnesota
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breuer, Heather	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Albertville, MN 55301		
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Associa Minnesota
Date 01/30/2026	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 02/13/2026	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 02/06/2026	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: 13/154 Rpt: 16/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, P.	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Reston, VA 20191	
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) CMC Virginia
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britton Jr., Charles	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mechanicsville, VA 23116	
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Community Group Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britton Jr., Charles	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Mechanicsville, VA 23116	
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Community Group Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, John	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions) CIO		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brock, John	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Frisco, TX 75034	
Principal occupation / Job title (See Instructions) CIO		Employer (See Instructions) Corporate Headquarters

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/154 Rpt: 17/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Mandy <hr/> 6 Contributor address; City; State; Zip Code West Chester, OH 45069	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Community Management Solutions
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Rodney <hr/> Contributor address; City; State; Zip Code Pontiac, MI 48340	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Onsite Manager		Employer (See Instructions) AAM LLC
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Rodney <hr/> Contributor address; City; State; Zip Code Pontiac, MI 48340	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Onsite Manager		Employer (See Instructions) AAM LLC
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruton, Kelly <hr/> Contributor address; City; State; Zip Code Rocky Point, NC 28457	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Acctant (I)		Employer (See Instructions) Community Association Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruton, Kelly <hr/> Contributor address; City; State; Zip Code Rocky Point, NC 28457	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Acctant (I)		Employer (See Instructions) Community Association Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/154 Rpt: 18/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	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 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Arthur	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Alpharetta, GA 30022		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Homeside Properties
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buccola, Nicholas	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Charlottesville, VA 22903		
Principal occupation / Job title (See Instructions) Sales-VP (Regional)		Employer (See Instructions) CMC Virginia
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buccola, Nicholas	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Charlottesville, VA 22903		
Principal occupation / Job title (See Instructions) Sales-VP (Regional)		Employer (See Instructions) CMC Virginia
Date 02/06/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/154 Rpt: 19/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buha, Colleen <hr/> 6 Contributor address; City; State; Zip Code Waterford, MI 48329	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 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bupp, Derek <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11215	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bupp, Derek <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11215	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bupp, Derek <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11215	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Michelle <hr/> Contributor address; City; State; Zip Code Warminster, PA 18974	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Mid Atlantic Management Corp

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/154 Rpt: 20/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	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 02/06/2026	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 02/20/2026	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 01/30/2026	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) Admin-Asst		Employer (See Instructions) CSSC
Date 02/13/2026	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) 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: 18/154 Rpt: 21/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, BYRON <hr/> 6 Contributor address; City; State; Zip Code PASADINA, MD 21122	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CALVERT, BYRON <hr/> Contributor address; City; State; Zip Code PASADINA, MD 21122	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Walter <hr/> Contributor address; City; State; Zip Code Virginia Beach, VA 23451	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Community Group Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Walter <hr/> Contributor address; City; State; Zip Code Virginia Beach, VA 23451	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Community Group Inc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caplan, Elisa <hr/> Contributor address; City; State; Zip Code Roswell, GA 30075	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR-Dir		Employer (See Instructions) Heritage Property Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/154 Rpt: 22/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caplan, Elisa <hr/> 6 Contributor address; City; State; Zip Code Roswell, GA 30075	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) HR-Dir		9 Employer (See Instructions) Heritage Property Mgmt Svc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caplinger, Yvette <hr/> Contributor address; City; State; Zip Code Tampa, FL 33618	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Associa Gulf Coast Inc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caplinger, Yvette <hr/> Contributor address; City; State; Zip Code Tampa, FL 33618	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Associa Gulf Coast Inc
Date 02/06/2026	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 02/20/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/154 Rpt: 23/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carona, Jeffrey	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Dallas, TX 75229		
8 Principal occupation / Job title (See Instructions) Project Mgmt-Mgr		9 Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carona, Jeffrey	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75229		
Principal occupation / Job title (See Instructions) Project Mgmt-Mgr		Employer (See Instructions) Corporate Headquarters
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carona, John	Amount of Contribution (\$) \$190.00
Contributor address; City; State; Zip Code Dallas, TX 75225		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carona, John	Amount of Contribution (\$) \$190.00
Contributor address; City; State; Zip Code Dallas, TX 75225		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Corporate Headquarters
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cassidy, Darrin	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Round Hill, VA 20141		
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: 21/154 Rpt: 24/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	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 01/30/2026	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 02/13/2026	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 02/06/2026	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
Date 02/20/2026	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: 22/154 Rpt: 25/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chilcote, Patricia <hr/> 6 Contributor address; City; State; Zip Code Linden, VA 22642	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) General Mgr (II)		9 Employer (See Instructions) CMC Virginia
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chilcote, Patricia <hr/> Contributor address; City; State; Zip Code Linden, VA 22642	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) CMC Virginia
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chounramany, Vannouvong <hr/> Contributor address; City; State; Zip Code Springfield, VA 22151	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) CMC Virginia
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chounramany, Vannouvong <hr/> Contributor address; City; State; Zip Code Springfield, VA 22151	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) CMC Virginia
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cicogna, Leslee <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78259	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Trainer		Employer (See Instructions) Associa Hill Country

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/154 Rpt: 26/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cicogna, Leslee <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78259	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Trainer		9 Employer (See Instructions) Associa Hill Country
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clappison, Dale <hr/> Contributor address; City; State; Zip Code Hollywood, FL 33021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Pennmanner Community
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clappison, Dale <hr/> Contributor address; City; State; Zip Code Hollywood, FL 33021	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Pennmanner Community
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Jeremy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Jeremy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$100.00
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: 24/154 Rpt: 27/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Sasha	7 Amount of Contribution (\$) \$12.00
	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 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Sasha	Amount of Contribution (\$) \$12.00
	Contributor address; City; State; Zip Code Fowlerville, MI 48836	
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Land Arc Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clausen, Sarah	Amount of Contribution (\$) \$8.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Communications-Dir		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clausen, Sarah	Amount of Contribution (\$) \$8.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Communications-Dir		Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clemente, Kari	Amount of Contribution (\$) \$8.00
	Contributor address; City; State; Zip Code Belmont, NC 28012	
Principal occupation / Job title (See Instructions) Onsite Manager		Employer (See Instructions) Community Association Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/154 Rpt: 28/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Gavin <hr/> 6 Contributor address; City; State; Zip Code Atlanta, GA 30350	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Heritage Property Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobb, Gavin <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30350	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Heritage Property Mgmt Svc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobbs, Vandon <hr/> Contributor address; City; State; Zip Code Montpelier, VA 23192	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Community Group Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobbs, Vandon <hr/> Contributor address; City; State; Zip Code Montpelier, VA 23192	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Community Group Inc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Norma <hr/> Contributor address; City; State; Zip Code Sugar Hill, GA 30518	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Homeside Properties

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/154 Rpt: 29/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Norma <hr/> 6 Contributor address; City; State; Zip Code Sugar Hill, GA 30518	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Homeside Properties
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooke, Jennifer <hr/> Contributor address; City; State; Zip Code Leland, NC 28451	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Community Association Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooke, Jennifer <hr/> Contributor address; City; State; Zip Code Leland, NC 28451	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Community Association Mgmt Svc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Paula <hr/> Contributor address; City; State; Zip Code Panama City, FL 32405	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Burg Management Co Inc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Paula <hr/> Contributor address; City; State; Zip Code Panama City, FL 32405	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Burg Management Co Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/154 Rpt: 30/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Copenhaver, Alison <hr/> 6 Contributor address; City; State; Zip Code Roswell, GA 30075	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Heritage Property Mgmt Svc
Date 02/13/2026	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) Ops-VP (Branch)		Employer (See Instructions) Heritage Property Mgmt Svc
Date 02/06/2026	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 (\$) \$58.00
Principal occupation / Job title (See Instructions) OPS-Dir-Corporate Dev		Employer (See Instructions) Canyon Gate Real Estate Servic
Date 02/20/2026	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 (\$) \$58.00
Principal occupation / Job title (See Instructions) OPS-Dir-Corporate Dev		Employer (See Instructions) Canyon Gate Real Estate Servic
Date 02/06/2026	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-Pres (Branch)		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: 28/154 Rpt: 31/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crosby II, Carnell <hr/> 6 Contributor address; City; State; Zip Code Royal Oak, MI 48073	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Kramer Triad Management Group
Date 02/06/2026	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-Dir (Branch)		Employer (See Instructions) Kramer Triad Management Group
Date 02/20/2026	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-Dir (Branch)		Employer (See Instructions) Kramer Triad Management Group
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cvach, Joseph <hr/> Contributor address; City; State; Zip Code Clearwater, FL 33755	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Gulf Coast Inc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cvach, Joseph <hr/> Contributor address; City; State; Zip Code Clearwater, FL 33755	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Gulf Coast Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/154 Rpt: 32/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) D'Souza, Tessa <hr/> 6 Contributor address; City; State; Zip Code Fallbrook, CA 92028	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) HR-Mgr		9 Employer (See Instructions) N N Jaeschke Inc
Date 02/13/2026	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 02/06/2026	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 (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Minnesota
Date 02/20/2026	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 (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Minnesota
Date 02/06/2026	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: 30/154 Rpt: 33/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	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 01/30/2026	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 02/13/2026	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 02/06/2026	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 02/20/2026	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: 31/154 Rpt: 34/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	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 02/13/2026	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 02/06/2026	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 02/20/2026	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 02/06/2026	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: 32/154 Rpt: 35/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dehn, Jeanine <hr/> 6 Contributor address; City; State; Zip Code Haymarket, VA 20169	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) CMC Virginia
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delgado, Alicia <hr/> Contributor address; City; State; Zip Code Elgin, IL 60124	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Chicagoland
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Delgado, Alicia <hr/> Contributor address; City; State; Zip Code Elgin, IL 60124	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Chicagoland
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodge, Jamie <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodge, Jamie <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/154 Rpt: 36/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodge, Mark <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) Ops-VP		9 Employer (See Instructions) Desert Resort Management
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodge, Mark <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92260	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) Desert Resort Management
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donovan, Drew <hr/> Contributor address; City; State; Zip Code Westfield, NJ 07090	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COO and Sr Property Manager		Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donovan, Drew <hr/> Contributor address; City; State; Zip Code Westfield, NJ 07090	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COO and Sr Property Manager		Employer (See Instructions) Choice NY Property Management
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donovan, Drew <hr/> Contributor address; City; State; Zip Code Westfield, NJ 07090	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) COO and Sr 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: 34/154 Rpt: 37/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draghici, Mihaela <hr/> 6 Contributor address; City; State; Zip Code Fairfax, VA 22030	7 Amount of Contribution (\$) \$0.25
8 Principal occupation / Job title (See Instructions) Acctant-Sr (III)		9 Employer (See Instructions) CMC Virginia
Date 02/20/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprey, Ronald <hr/> Contributor address; City; State; Zip Code Hutchinson Island, FL 34949	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Intg Svcs-VP		Employer (See Instructions) CMP Orlando
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duprey, Ronald <hr/> Contributor address; City; State; Zip Code Hutchinson Island, FL 34949	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Intg Svcs-VP		Employer (See Instructions) CMP Orlando
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durbin, Kenneth <hr/> Contributor address; City; State; Zip Code Glen Allen, VA 23060	Amount of Contribution (\$) \$5.00
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: 35/154 Rpt: 38/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durbin, Kenneth <hr/> 6 Contributor address; City; State; Zip Code Glen Allen, VA 23060	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Community Group Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddy, Andrea <hr/> Contributor address; City; State; Zip Code Hilton Head Island, SC 29926	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Atlantic States Management
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddy, Andrea <hr/> Contributor address; City; State; Zip Code Hilton Head Island, SC 29926	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Atlantic States Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eden Carona, Helen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$190.00
Principal occupation / Job title (See Instructions) CCO-Chief Corporate Officer		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eden Carona, Helen <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225	Amount of Contribution (\$) \$190.00
Principal occupation / Job title (See Instructions) CCO-Chief Corporate Officer		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: 36/154 Rpt: 39/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/26/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Egbuna, Chimudi <hr/> 6 Contributor address; City; State; Zip Code Penfield, NY 14526	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Corporate Controller		9 Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Egbuna, Chimudi <hr/> Contributor address; City; State; Zip Code Penfield, NY 14526	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Corporate Controller		Employer (See Instructions) Choice NY Property Management
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Egbuna, Chimudi <hr/> Contributor address; City; State; Zip Code Penfield, NY 14526	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Corporate Controller		Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eggleston, Kelly <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87120	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Canyon Gate Real Estate Servic
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eggleston, Kelly <hr/> Contributor address; City; State; Zip Code Albuquerque, NM 87120	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		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: 37/154 Rpt: 40/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Taylor <hr/> 6 Contributor address; City; State; Zip Code Lorton, VA 22079	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Taylor <hr/> Contributor address; City; State; Zip Code Lorton, VA 22079	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 02/06/2026	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 02/20/2026	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 02/06/2026	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) IT-Helpdesk-Analyst		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: 38/154 Rpt: 41/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Encabo, Miguel Liam <hr/> 6 Contributor address; City; State; Zip Code Rockwall, TX 75032	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) IT-Helpdesk-Analyst		9 Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	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 02/13/2026	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 01/30/2026	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 Mgr (II)		Employer (See Instructions) Community Association Mgmt Svc
Date 02/13/2026	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 Mgr (II)		Employer (See Instructions) Community Association Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/154 Rpt: 42/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Falcon-Heneghan, Gina <hr/> 6 Contributor address; City; State; Zip Code Oceanside, CA 92057	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) N N Jaeschke Inc
Date 02/13/2026	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 01/26/2026	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 (\$) \$58.46
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	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 (\$) \$58.46
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Choice NY Property Management
Date 02/20/2026	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 (\$) \$58.46
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: 40/154 Rpt: 43/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fenn, Jolene <hr/> 6 Contributor address; City; State; Zip Code Otsego, MN 55301	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Associa Minnesota
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fenn, Jolene <hr/> Contributor address; City; State; Zip Code Otsego, MN 55301	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Minnesota
Date 02/06/2026	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 02/20/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Field, John <hr/> Contributor address; City; State; Zip Code Carbondale, CO 81623	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr (Regional)		Employer (See Instructions) Associa Colorado

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/154 Rpt: 44/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Field, John <hr/> 6 Contributor address; City; State; Zip Code Carbondale, CO 81623	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Ops-VP-Sr (Regional)		9 Employer (See Instructions) Associa Colorado
Date 01/26/2026	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 (\$) \$9.50
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	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 (\$) \$9.50
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 02/20/2026	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 (\$) \$9.50
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Erica <hr/> Contributor address; City; State; Zip Code Dundalk, MD 21222	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) CMC Virginia

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/154 Rpt: 45/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Erica	7 Amount of Contribution (\$) \$23.00
6 Contributor address; City; State; Zip Code Dundalk, MD 21222		
8 Principal occupation / Job title (See Instructions) General Mgr (II)		9 Employer (See Instructions) CMC Virginia
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flinchum, Adam	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Arlington, VA 22203		
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) CMC Virginia
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flinchum, Adam	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Arlington, VA 22203		
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) CMC Virginia
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foell, Kathryn	Amount of Contribution (\$) \$9.62
Contributor address; City; State; Zip Code The Colony, TX 75056		
Principal occupation / Job title (See Instructions) IT-Adminstr-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foell, Kathryn	Amount of Contribution (\$) \$9.62
Contributor address; City; State; Zip Code The Colony, TX 75056		
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: 43/154 Rpt: 46/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fortin, Andrew	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Fort Meade, FL 33841		
8 Principal occupation / Job title (See Instructions) Govmt Affairs-VP-Sr		9 Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	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 02/06/2026	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 02/20/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frangiosa, Theresa	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Jeffersonville, PA 19403		
Principal occupation / Job title (See Instructions) Admin-Asst		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: 44/154 Rpt: 47/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	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 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freedman, Max <hr/> Contributor address; City; State; Zip Code New York, NY 10028	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) Maxwell Kates Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freedman, Max <hr/> Contributor address; City; State; Zip Code New York, NY 10028	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) Maxwell Kates Inc
Date 02/06/2026	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 Marketing Officer		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	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 Marketing Officer		Employer (See Instructions) Corporate Headquarters

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/154 Rpt: 48/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	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 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Matthew <hr/> Contributor address; City; State; Zip Code Madison Heights, MI 48071	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Code Enforc-Assc		Employer (See Instructions) Kramer Triad Management Group
Date 01/30/2026	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 02/13/2026	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 02/06/2026	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: 46/154 Rpt: 49/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galambos, Theresa <hr/> 6 Contributor address; City; State; Zip Code Sterling, VA 20164	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Acctng-Dir (Branch)		9 Employer (See Instructions) CMC Virginia
Date 02/06/2026	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 02/20/2026	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-VP		Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	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 02/13/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/154 Rpt: 50/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillespie, Kirk <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75010	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Ops-VP-Sr		9 Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillespie, Kirk <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75010	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillman, Andrew <hr/> Contributor address; City; State; Zip Code Miami, FL 33138	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Marquis
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillman, Andrew <hr/> Contributor address; City; State; Zip Code Miami, FL 33138	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Marquis
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gjekaj, Elona <hr/> Contributor address; City; State; Zip Code Wallington, NJ 07057	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Property Accountant		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: 48/154 Rpt: 51/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gjekaj, Elona <hr/> 6 Contributor address; City; State; Zip Code Wallington, NJ 07057	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Property Accountant		9 Employer (See Instructions) Choice NY Property Management
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gjekaj, Elona <hr/> Contributor address; City; State; Zip Code Wallington, NJ 07057	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Property Accountant		Employer (See Instructions) Choice NY Property Management
Date 01/30/2026	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 (\$) \$9.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 02/13/2026	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 (\$) \$9.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 02/06/2026	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: 49/154 Rpt: 52/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	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 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gostnell, Matthew <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Field Serv-Dir (Regional)		Employer (See Instructions) Associa Hill Country
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gostnell, Matthew <hr/> Contributor address; City; State; Zip Code Round Rock, TX 78665	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Field Serv-Dir (Regional)		Employer (See Instructions) Associa Hill Country
Date 01/30/2026	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) Sales-Dir		Employer (See Instructions) MAMCO - Mid Atlantic
Date 02/13/2026	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) Sales-Dir		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: 50/154 Rpt: 53/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	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 02/20/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Andre <hr/> Contributor address; City; State; Zip Code Holly Springs, GA 30115	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Homeside Properties
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Andre <hr/> Contributor address; City; State; Zip Code Holly Springs, GA 30115	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Homeside Properties
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenwood, Lee <hr/> Contributor address; City; State; Zip Code Boston, MA 02122	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Govmt Affairs-VP		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: 51/154 Rpt: 54/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenwood, Lee <hr/> 6 Contributor address; City; State; Zip Code Boston, MA 02122	7 Amount of Contribution (\$) \$52.00
8 Principal occupation / Job title (See Instructions) Govmt Affairs-VP		9 Employer (See Instructions) Evergreen Harvard Group LLC
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Crystal <hr/> Contributor address; City; State; Zip Code Santa Fe, TN 38482	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Onsite Manager		Employer (See Instructions) Associa Tennessee
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Crystal <hr/> Contributor address; City; State; Zip Code Santa Fe, TN 38482	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Onsite Manager		Employer (See Instructions) Associa Tennessee
Date 02/06/2026	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 02/20/2026	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: 52/154 Rpt: 55/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	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 01/30/2026	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 02/13/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAIRE-WILLIAMS, JESSICA <hr/> Contributor address; City; State; Zip Code TEMECULA, CA 92592	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) The Prescott Companies Inc
Date 02/13/2026	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: 53/154 Rpt: 56/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hames, James <hr/> 6 Contributor address; City; State; Zip Code Upper Marlboro, MD 20772	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) CMC Virginia
Date 02/20/2026	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 01/30/2026	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 (III)		Employer (See Instructions) The Prescott Companies Inc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Happ, Roberta <hr/> Contributor address; City; State; Zip Code Vista, CA 92081	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) The Prescott Companies Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmon, Lynn <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78247	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Sales-Dir (Regional)		Employer (See Instructions) Associa Hill Country

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/154 Rpt: 57/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Jenniffer <hr/> Contributor address; City; State; Zip Code Eastampton, NJ 08060	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Sales-Mgr		Employer (See Instructions) MAMCO - Mid Atlantic
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Jenniffer <hr/> Contributor address; City; State; Zip Code Eastampton, NJ 08060	Amount of Contribution (\$) \$17.00
Principal occupation / Job title (See Instructions) Sales-Mgr		Employer (See Instructions) MAMCO - Mid Atlantic
Date 01/30/2026	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) General Mgr (III)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 02/13/2026	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) General Mgr (III)		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: 55/154 Rpt: 58/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartmann, Lynne <hr/> 6 Contributor address; City; State; Zip Code Runnemede, NJ 08078	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) MAMCO - Mid Atlantic
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartmann, Lynne <hr/> Contributor address; City; State; Zip Code Runnemede, NJ 08078	Amount of Contribution (\$) \$7.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hastings, Nancy <hr/> Contributor address; City; State; Zip Code Barnegat, NJ 08005	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr (Regional)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hastings, Nancy <hr/> Contributor address; City; State; Zip Code Barnegat, NJ 08005	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr (Regional)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 01/30/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/154 Rpt: 59/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	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 02/06/2026	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 02/20/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Taylor <hr/> Contributor address; City; State; Zip Code Irmo, SC 29063	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Community Association Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayes, Taylor <hr/> Contributor address; City; State; Zip Code Irmo, SC 29063	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Community Association Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/154 Rpt: 60/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heinecke, Jesse <hr/> 6 Contributor address; City; State; Zip Code New Richmond, WI 54017	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) Cities Management Inc
Date 02/20/2026	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 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henaο, Rosa <hr/> Contributor address; City; State; Zip Code Glen Allen, VA 23060	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Community Group Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henaο, Rosa <hr/> Contributor address; City; State; Zip Code Glen Allen, VA 23060	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Community Group Inc
Date 02/06/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/154 Rpt: 61/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henley, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75219	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) General Mgr (I)		9 Employer (See Instructions) Somerset Association Managemen
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennessy, Joann <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19154	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Mid Atlantic Management Corp
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hennessy, Joann <hr/> Contributor address; City; State; Zip Code Philadelphia, PA 19154	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Mid Atlantic Management Corp
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensley, John <hr/> Contributor address; City; State; Zip Code Franklin, KY 42134	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Associa Tennessee
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hensley, John <hr/> Contributor address; City; State; Zip Code Franklin, KY 42134	Amount of Contribution (\$) \$11.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Associa Tennessee

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/154 Rpt: 62/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermogenes, Ma Carcel <hr/> 6 Contributor address; City; State; Zip Code Springfield, VA 22151	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) CMC Virginia
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hermogenes, Ma Carcel <hr/> Contributor address; City; State; Zip Code Springfield, VA 22151	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) CMC Virginia
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Michelle <hr/> Contributor address; City; State; Zip Code Livingston, NJ 07039	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Rec-Dir		Employer (See Instructions) CMC NJ
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Michelle <hr/> Contributor address; City; State; Zip Code Livingston, NJ 07039	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Rec-Dir		Employer (See Instructions) CMC NJ
Date 02/06/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/154 Rpt: 63/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hertzler, Rebecca <hr/> Contributor address; City; State; Zip Code Orlando, FL 32817	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) CMP Orlando
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hertzler, Rebecca <hr/> Contributor address; City; State; Zip Code Orlando, FL 32817	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) CMP Orlando
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Robin <hr/> Contributor address; City; State; Zip Code Richmond, VA 23228	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Community Group Inc
Date 02/20/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/154 Rpt: 64/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilliard, Matthew <hr/> 6 Contributor address; City; State; Zip Code Cumming, GA 30041	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		9 Employer (See Instructions) Homeside Properties
Date 02/13/2026	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 01/30/2026	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 (\$) \$4.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) The Prescott Companies Inc
Date 02/13/2026	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 (\$) \$4.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) The Prescott Companies Inc
Date 01/30/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/154 Rpt: 65/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hohl, Matthew <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60643	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Field Serv-Dir (Regional)		9 Employer (See Instructions) Associa Chicagoland
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holguin, Jimmy <hr/> Contributor address; City; State; Zip Code Port Chester, NY 10573	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Sr Property Accountant		Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holguin, Jimmy <hr/> Contributor address; City; State; Zip Code Port Chester, NY 10573	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Sr Property Accountant		Employer (See Instructions) Choice NY Property Management
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holguin, Jimmy <hr/> Contributor address; City; State; Zip Code Port Chester, NY 10573	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Sr Property Accountant		Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/154 Rpt: 66/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holguin, Sellah <hr/> 6 Contributor address; City; State; Zip Code Albuquerque, NM 87121	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Canyon Gate Real Estate Servic
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, April <hr/> Contributor address; City; State; Zip Code Newport News, VA 23608	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Community Group Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holt, April <hr/> Contributor address; City; State; Zip Code Newport News, VA 23608	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Community Group Inc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horndasch, Erica <hr/> Contributor address; City; State; Zip Code Wauconda, IL 60084	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Chicagoland
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horndasch, Erica <hr/> Contributor address; City; State; Zip Code Wauconda, IL 60084	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Chicagoland

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/154 Rpt: 67/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hourscht, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Oro Valley, AZ 85755	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Associa Arizona
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hourscht, Jennifer <hr/> Contributor address; City; State; Zip Code Oro Valley, AZ 85755	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Arizona
Date 02/06/2026	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 (\$) \$6.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Community Group Inc
Date 02/20/2026	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 (\$) \$6.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Community Group Inc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Scott <hr/> Contributor address; City; State; Zip Code Sacramento, CA 95822	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) Associa Northern California

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/154 Rpt: 68/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Scott <hr/> 6 Contributor address; City; State; Zip Code Sacramento, CA 95822	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Regional)		9 Employer (See Instructions) Associa Northern California
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Melanie <hr/> Contributor address; City; State; Zip Code Hendersonville, NC 28739	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) IPM Corp of Brevard Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Melanie <hr/> Contributor address; City; State; Zip Code Hendersonville, NC 28739	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) IPM Corp of Brevard Inc
Date 02/06/2026	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 02/20/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/154 Rpt: 69/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	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) Community-VP (Branch)		9 Employer (See Instructions) Heritage Property Mgmt Svc
Date 02/13/2026	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) Community-VP (Branch)		Employer (See Instructions) Heritage Property Mgmt Svc
Date 01/30/2026	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
Date 02/13/2026	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
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan <hr/> Contributor address; City; State; Zip Code Plainville, GA 30733	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Acctng-Spec (II)		Employer (See Instructions) Homeside Properties

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/154 Rpt: 70/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Susan <hr/> 6 Contributor address; City; State; Zip Code Plainville, GA 30733	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Acctng-Spec (II)		9 Employer (See Instructions) Homeside Properties
Date 02/06/2026	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 02/20/2026	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 02/06/2026	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 02/20/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/154 Rpt: 71/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	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 (\$) <div style="text-align: right;">\$1.00</div>
8 Principal occupation / Job title (See Instructions) Ops-Analyst-Sr		9 Employer (See Instructions) Mid Atlantic Management Corp
Date 02/13/2026	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 (\$) <div style="text-align: right;">\$1.00</div>
Principal occupation / Job title (See Instructions) Ops-Analyst-Sr		Employer (See Instructions) Mid Atlantic Management Corp
Date 02/06/2026	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 (\$) <div style="text-align: right;">\$5.00</div>
Principal occupation / Job title (See Instructions) Maint-Tech		Employer (See Instructions) CMC Virginia
Date 02/20/2026	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 (\$) <div style="text-align: right;">\$5.00</div>
Principal occupation / Job title (See Instructions) Maint-Tech		Employer (See Instructions) CMC Virginia
Date 02/06/2026	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 (\$) <div style="text-align: right;">\$5.00</div>
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: 69/154 Rpt: 72/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kehayias, Sofia	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Falls Church, VA 22042		
8 Principal occupation / Job title (See Instructions) General Mgr (III)		9 Employer (See Instructions) CMC Virginia
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Marlo	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Austin, TX 78748		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Somerset Association Managemen
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Marlo	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Austin, TX 78748		
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Somerset Association Managemen
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Keanon	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code Allen, TX 75002		
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) CSSC
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Keanon	Amount of Contribution (\$) \$18.00
Contributor address; City; State; Zip Code Allen, TX 75002		
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: 70/154 Rpt: 73/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	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 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerwin, Heather <hr/> Contributor address; City; State; Zip Code Ft. Collins, CO 80521	Amount of Contribution (\$) \$23.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) Associa Colorado
Date 02/06/2026	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 02/20/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Deanna <hr/> Contributor address; City; State; Zip Code Winnabow, NC 28479	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Community Association Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/154 Rpt: 74/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Deanna <hr/> 6 Contributor address; City; State; Zip Code Winnabow, NC 28479	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-VP (Branch)		9 Employer (See Instructions) Community Association Mgmt Svc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Morgan <hr/> Contributor address; City; State; Zip Code Hoover, AL 35226	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Principal Mgmt Group Houston
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, Morgan <hr/> Contributor address; City; State; Zip Code Hoover, AL 35226	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Principal Mgmt Group Houston
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klesmit, Lynn <hr/> Contributor address; City; State; Zip Code Coon Rapids, MN 55448	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Minnesota
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klesmit, Lynn <hr/> Contributor address; City; State; Zip Code Coon Rapids, MN 55448	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		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: 72/154 Rpt: 75/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kluever, Larry <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75231	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) General Counsel-Asst		9 Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	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 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kluver, Joshua <hr/> Contributor address; City; State; Zip Code New Hope, MN 55428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Cities Management Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kluver, Joshua <hr/> Contributor address; City; State; Zip Code New Hope, MN 55428	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Cities Management Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knoop, Danika <hr/> Contributor address; City; State; Zip Code Van Alstyne, TX 75495	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) OPS-Dir-Corporate Dev		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: 73/154 Rpt: 76/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knoop, Danika <hr/> 6 Contributor address; City; State; Zip Code Van Alstyne, TX 75495	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) OPS-Dir-Corporate Dev		9 Employer (See Instructions) Corporate Headquarters
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kraft, Meredith <hr/> Contributor address; City; State; Zip Code Union Bridge, MD 21791	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) CMC Virginia
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kraft, Meredith <hr/> Contributor address; City; State; Zip Code Union Bridge, MD 21791	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) CMC Virginia
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krueger, John <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$122.00
Principal occupation / Job title (See Instructions) Govmt Affairs-VP		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krueger, John <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$122.00
Principal occupation / Job title (See Instructions) Govmt Affairs-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: 74/154 Rpt: 77/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruppa, Brian <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75204	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Chief Legal Officer		9 Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kruppa, Brian <hr/> Contributor address; City; State; Zip Code Dallas, TX 75204	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Chief Legal Officer		Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDELL, JASON <hr/> Contributor address; City; State; Zip Code Henderson, NV 89052	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Associa Nevada South
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LEDELL, JASON <hr/> Contributor address; City; State; Zip Code Henderson, NV 89052	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Associa Nevada South
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUSCOMBE, JILL <hr/> Contributor address; City; State; Zip Code Royal Oak, MI 48073	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acct Mgmt-Mgr		Employer (See Instructions) Land Arc Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/154 Rpt: 78/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LUSCOMBE, JILL	7 Amount of Contribution (\$) \$2.00
6 Contributor address; City; State; Zip Code Royal Oak, MI 48073		
8 Principal occupation / Job title (See Instructions) Acct Mgmt-Mgr		9 Employer (See Instructions) Land Arc Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lainez, Gita	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Fairfax, VA 22030		
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) CMC Virginia
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lainez, Gita	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Fairfax, VA 22030		
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) CMC Virginia
Date 01/30/2026	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
Date 02/13/2026	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: 76/154 Rpt: 79/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	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 02/13/2026	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 01/30/2026	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) Community-Mgr (I)		Employer (See Instructions) Community Management Assoc Inc
Date 02/13/2026	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) Community-Mgr (I)		Employer (See Instructions) Community Management Assoc Inc
Date 01/30/2026	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) HR-Dir		Employer (See Instructions) Community Association Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/154 Rpt: 80/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	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) HR-Dir		9 Employer (See Instructions) Community Association Mgmt Svc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lencioni, Kelli <hr/> Contributor address; City; State; Zip Code Manassas, VA 20109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Collections-Mgr		Employer (See Instructions) Legum & Norman Realty Inc.
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liebling, Jeffrey <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Acctng-Dir (Branch)		Employer (See Instructions) Associa Chicagoland
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liebling, Jeffrey <hr/> Contributor address; City; State; Zip Code Deerfield, IL 60015	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Acctng-Dir (Branch)		Employer (See Instructions) Associa Chicagoland
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lippert, Marc <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92211	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Ops-Dir (Branch)		Employer (See Instructions) Associa OnCall California Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/154 Rpt: 81/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lippert, Marc <hr/> 6 Contributor address; City; State; Zip Code Palm Desert, CA 92211	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Ops-Dir (Branch)		9 Employer (See Instructions) Associa OnCall California Inc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logan, Rita <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) CSSC
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logan, Rita <hr/> Contributor address; City; State; Zip Code The Colony, TX 75056	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) CSSC
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, William <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Marketing-VP		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, William <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Marketing-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: 79/154 Rpt: 82/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Christina	7 Amount of Contribution (\$) \$1.00
	6 Contributor address; City; State; Zip Code New Bern, NC 28560	
8 Principal occupation / Job title (See Instructions) Onsite Manager		9 Employer (See Instructions) Community Association Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Christina	Amount of Contribution (\$) \$1.00
	Contributor address; City; State; Zip Code New Bern, NC 28560	
Principal occupation / Job title (See Instructions) Onsite Manager		Employer (See Instructions) Community Association Mgmt Svc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Kimberly	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Palm Desert, CA 92260	
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Kimberly	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Palm Desert, CA 92260	
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Raul	Amount of Contribution (\$) \$2.00
	Contributor address; City; State; Zip Code Wylie, TX 75098	
Principal occupation / Job title (See Instructions) Acctng-Supr		Employer (See Instructions) CSSC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/154 Rpt: 83/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Raul <hr/> 6 Contributor address; City; State; Zip Code Wylie, TX 75098	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Acctng-Supr		9 Employer (See Instructions) CSSC
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lounsbery, Carolyn <hr/> Contributor address; City; State; Zip Code Sterling Heights, MI 48313	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) Kramer Triad Management Group
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lounsbery, Carolyn <hr/> Contributor address; City; State; Zip Code Sterling Heights, MI 48313	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) Kramer Triad Management Group
Date 02/06/2026	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 02/20/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/154 Rpt: 84/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/26/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lue, Shaun <hr/> 6 Contributor address; City; State; Zip Code River Vale, NJ 07675	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) SR VP Accounting		9 Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lue, Shaun <hr/> Contributor address; City; State; Zip Code River Vale, NJ 07675	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SR VP Accounting		Employer (See Instructions) Choice NY Property Management
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lue, Shaun <hr/> Contributor address; City; State; Zip Code River Vale, NJ 07675	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) SR VP Accounting		Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luginbuhl, Jessica <hr/> Contributor address; City; State; Zip Code Somers, CT 06071	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Westford Real Estate Mgmt LLC
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luginbuhl, Jessica <hr/> Contributor address; City; State; Zip Code Somers, CT 06071	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Westford Real Estate Mgmt LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/154 Rpt: 85/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luginbuhl, Kari-Lynne <hr/> 6 Contributor address; City; State; Zip Code Ellington, CT 06029	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Westford Real Estate Mgmt LLC
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luginbuhl, Kari-Lynne <hr/> Contributor address; City; State; Zip Code Ellington, CT 06029	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Westford Real Estate Mgmt LLC
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luke, Jamie <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luke, Jamie <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 02/06/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/154 Rpt: 86/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCILYAR, HANG <hr/> 6 Contributor address; City; State; Zip Code Richmond, VA 23228	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Admin-Office-Mgr		9 Employer (See Instructions) Community Group Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madison, Daniel <hr/> Contributor address; City; State; Zip Code Cross Hill, SC 29332	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-Dir		Employer (See Instructions) Carolina Moves LLC
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madison, Daniel <hr/> Contributor address; City; State; Zip Code Cross Hill, SC 29332	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-Dir		Employer (See Instructions) Carolina Moves LLC
Date 02/06/2026	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 02/20/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/154 Rpt: 87/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magyar, Scott <hr/> 6 Contributor address; City; State; Zip Code Denver, CO 80211	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Associa Colorado
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Magyar, Scott <hr/> Contributor address; City; State; Zip Code Denver, CO 80211	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Colorado
Date 01/30/2026	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 02/13/2026	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 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallard, Beverly <hr/> Contributor address; City; State; Zip Code Chesapeake, VA 23320	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Admin-Office-Mgr		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: 85/154 Rpt: 88/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallard, Beverly <hr/> 6 Contributor address; City; State; Zip Code Chesapeake, VA 23320	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Admin-Office-Mgr		9 Employer (See Instructions) Community Group Inc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallory, Tammy <hr/> Contributor address; City; State; Zip Code Panama City, FL 32404	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Burg Management Co Inc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallory, Tammy <hr/> Contributor address; City; State; Zip Code Panama City, FL 32404	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Burg Management Co Inc
Date 01/30/2026	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 02/13/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/154 Rpt: 89/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcou, Amalea <hr/> 6 Contributor address; City; State; Zip Code West Chicago, IL 60185	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Trainer-Sr		9 Employer (See Instructions) Associa Chicagoland
Date 02/13/2026	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 01/30/2026	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 02/13/2026	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 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Joy <hr/> Contributor address; City; State; Zip Code Moundsview, MN 55112	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Cities Management Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/154 Rpt: 90/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marino, Joy <hr/> 6 Contributor address; City; State; Zip Code Moundsview, MN 55112	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Cities Management Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Linda <hr/> Contributor address; City; State; Zip Code Canton, MI 48188	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Kramer Triad Management Group
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Linda <hr/> Contributor address; City; State; Zip Code Canton, MI 48188	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Kramer Triad Management Group
Date 02/06/2026	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 02/20/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/154 Rpt: 91/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marton, Sue <hr/> 6 Contributor address; City; State; Zip Code Richmond, VA 23235	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) Community Group Inc
Date 02/20/2026	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 02/06/2026	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 (II)		Employer (See Instructions) PMG North Texas
Date 02/20/2026	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 (II)		Employer (See Instructions) PMG North Texas
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzarella, Nicholas <hr/> Contributor address; City; State; Zip Code Potomac Falls, VA 20165	Amount of Contribution (\$) \$36.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		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: 89/154 Rpt: 92/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzarella, Nicholas <hr/> 6 Contributor address; City; State; Zip Code Potomac Falls, VA 20165	7 Amount of Contribution (\$) \$36.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Regional)		9 Employer (See Instructions) CMC Virginia
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Robert <hr/> Contributor address; City; State; Zip Code Concord, MA 01742	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Dartmouth
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Robert <hr/> Contributor address; City; State; Zip Code Concord, MA 01742	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Dartmouth
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDevitt, Shane <hr/> Contributor address; City; State; Zip Code Costa Mesa, CA 92627	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acctant (I)		Employer (See Instructions) PCM California
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDevitt, Shane <hr/> Contributor address; City; State; Zip Code Costa Mesa, CA 92627	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acctant (I)		Employer (See Instructions) PCM California

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/154 Rpt: 93/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Kim	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Dallas, TX 75214		
8 Principal occupation / Job title (See Instructions) Acctng-VP		9 Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonald, Kim	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Dallas, TX 75214		
Principal occupation / Job title (See Instructions) Acctng-VP		Employer (See Instructions) Corporate Headquarters
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeill, Matthew	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code St. Paul, MN 55102		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Cities Management Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McNeill, Matthew	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code St. Paul, MN 55102		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Cities Management Inc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mejia, Lucia	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code Bacliff, TX 77518		
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Houston Community Mgmt Service

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/154 Rpt: 94/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mejia, Lucia <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 01/30/2026	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 (II)		Employer (See Instructions) CSSC
Date 02/13/2026	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 (II)		Employer (See Instructions) CSSC
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Cameron <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76028	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Concierge-Sr		Employer (See Instructions) Somerset Association Managemen
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Cameron <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76028	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Concierge-Sr		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: 92/154 Rpt: 95/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Blaine, MN 55434	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Escrow/Resale-Spec		9 Employer (See Instructions) Cities Management Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Kathleen <hr/> Contributor address; City; State; Zip Code Blaine, MN 55434	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Escrow/Resale-Spec		Employer (See Instructions) Cities Management Inc
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Daniel <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Daniel <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Daniel <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11218	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/154 Rpt: 96/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Lori	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Fishers, IN 46038		
8 Principal occupation / Job title (See Instructions) Maint-Coord		9 Employer (See Instructions) CASI
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Lori	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Fishers, IN 46038		
Principal occupation / Job title (See Instructions) Maint-Coord		Employer (See Instructions) CASI
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mixhau, Penny	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Prescott, WI 54021		
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Cities Management Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mixhau, Penny	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Prescott, WI 54021		
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Cities Management Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Eddie	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Honolulu, HI 96825		
Principal occupation / Job title (See Instructions) Community-Mgr (III)		Employer (See Instructions) Associa Hawaii

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/154 Rpt: 97/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Eddie <hr/> 6 Contributor address; City; State; Zip Code Honolulu, HI 96825	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (III)		9 Employer (See Instructions) Associa Hawaii
Date 01/30/2026	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) Houston Community Mgmt Service
Date 02/13/2026	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) Houston Community Mgmt Service
Date 01/30/2026	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 02/13/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/154 Rpt: 98/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	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 02/13/2026	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
Date 01/30/2026	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 02/13/2026	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 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Anthony <hr/> Contributor address; City; State; Zip Code Moseley, VA 23120	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		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: 96/154 Rpt: 99/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Anthony <hr/> 6 Contributor address; City; State; Zip Code Moseley, VA 23120	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Community Group Inc
Date 02/06/2026	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 (\$) \$3.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Atlantic States Management
Date 02/20/2026	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 (\$) \$3.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Atlantic States Management
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mutothori, Penina <hr/> Contributor address; City; State; Zip Code Garland, TX 75044	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 02/13/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/154 Rpt: 100/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIAZ, SOFIA <hr/> 6 Contributor address; City; State; Zip Code WOODBURY, MN 55129	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Rec-Dir		9 Employer (See Instructions) Associa Minnesota
Date 02/20/2026	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 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, CHELSEA <hr/> Contributor address; City; State; Zip Code Sachse, TX 75048	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) PMG North Texas
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NICHOLS, CHELSEA <hr/> Contributor address; City; State; Zip Code Sachse, TX 75048	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) PMG North Texas
Date 02/06/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/154 Rpt: 101/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neely, Carolyn <hr/> 6 Contributor address; City; State; Zip Code Hilton Head, SC 29928	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Association Services Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Corey Jay <hr/> Contributor address; City; State; Zip Code Mineral, VA 23117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Community Group Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Corey Jay <hr/> Contributor address; City; State; Zip Code Mineral, VA 23117	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Community Group Inc
Date 01/30/2026	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) Ops-VP (Regional)		Employer (See Instructions) CMP Orlando
Date 02/13/2026	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) Ops-VP (Regional)		Employer (See Instructions) CMP Orlando

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/154 Rpt: 102/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niles, Darcy <hr/> 6 Contributor address; City; State; Zip Code Alexandria, VA 22315	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Community-VP (Branch)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niles, Darcy <hr/> Contributor address; City; State; Zip Code Alexandria, VA 22315	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 01/30/2026	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 02/13/2026	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 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Keefe, Michelle <hr/> Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Chief HR Officer		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: 100/154 Rpt: 103/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Keefe, Michelle <hr/> 6 Contributor address; City; State; Zip Code Colleyville, TX 76034	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Chief HR Officer		9 Employer (See Instructions) Corporate Headquarters
Date 02/06/2026	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
Date 02/20/2026	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
Date 01/30/2026	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 02/13/2026	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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/154 Rpt: 104/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Toole, James <hr/> 6 Contributor address; City; State; Zip Code Deptford, NJ 08096	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) MAMCO - Mid Atlantic
Date 02/13/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oberthier, Claudia <hr/> Contributor address; City; State; Zip Code Carol Stream, IL 60188	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Arizona
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oberthier, Claudia <hr/> Contributor address; City; State; Zip Code Carol Stream, IL 60188	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Arizona
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orberg, Derrick <hr/> Contributor address; City; State; Zip Code Deland, FL 32724	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) CMP Orlando

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/154 Rpt: 105/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	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 01/30/2026	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) Community-VP (Branch)		Employer (See Instructions) Community Association Mgmt Svc
Date 02/13/2026	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) Community-VP (Branch)		Employer (See Instructions) Community Association Mgmt Svc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, David <hr/> Contributor address; City; State; Zip Code Leland, NC 28451	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Community Association Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, David <hr/> Contributor address; City; State; Zip Code Leland, NC 28451	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Community Association Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/154 Rpt: 106/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Georganne <hr/> 6 Contributor address; City; State; Zip Code FATE, TX 75189	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Sales-VP (Regional)		9 Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ortiz, Georganne <hr/> Contributor address; City; State; Zip Code FATE, TX 75189	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Sales-VP (Regional)		Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	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 02/13/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ou, Chonavy <hr/> Contributor address; City; State; Zip Code Garland, TX 75042	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) CSSC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ou, Chonavy <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75042	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Admin-Asst		9 Employer (See Instructions) CSSC
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Overcash, Jahna <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Hill Country
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Overcash, Jahna <hr/> Contributor address; City; State; Zip Code Smithville, TX 78957	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Associa Hill Country
Date 01/30/2026	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 02/13/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 105/154 Rpt: 108/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Packard, Michael <hr/> 6 Contributor address; City; State; Zip Code Carlsbad, CA 92009	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Bus Devolp-VP-Sr		9 Employer (See Instructions) Associa Northern California
Date 02/13/2026	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 (\$) \$100.00
Principal occupation / Job title (See Instructions) Bus Devolp-VP-Sr		Employer (See Instructions) Associa Northern California
Date 01/30/2026	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.
Date 02/13/2026	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.
Date 02/06/2026	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-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: 106/154 Rpt: 109/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perea, Idella	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Terrell, TX 75160		
8 Principal occupation / Job title (See Instructions) HR-VP-Sr		9 Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Yolanda	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code The Colony, TX 75056		
Principal occupation / Job title (See Instructions) Cust Serv-VP		Employer (See Instructions) CSSC
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Yolanda	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code The Colony, TX 75056		
Principal occupation / Job title (See Instructions) Cust Serv-VP		Employer (See Instructions) CSSC
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, James	Amount of Contribution (\$) \$17.00
Contributor address; City; State; Zip Code Annandale, VA 22003		
Principal occupation / Job title (See Instructions) General Mgr (III)		Employer (See Instructions) CMC Virginia
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, James	Amount of Contribution (\$) \$17.00
Contributor address; City; State; Zip Code Annandale, VA 22003		
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: 107/154 Rpt: 110/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pesce, Michael <hr/> 6 Contributor address; City; State; Zip Code Chester, NJ 07930	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) CMC NJ
Date 02/13/2026	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 01/30/2026	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 (\$) \$50.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 02/13/2026	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 (\$) \$50.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 01/30/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 108/154 Rpt: 111/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porras, Ruben <hr/> 6 Contributor address; City; State; Zip Code Lewisville, TX 75067	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Acctng-Spec (I)		9 Employer (See Instructions) CSSC
Date 02/06/2026	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 02/20/2026	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 02/06/2026	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 02/20/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/154 Rpt: 112/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	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 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quinn, Michelle <hr/> Contributor address; City; State; Zip Code Burlington, NJ 08016	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Finance-VP (Branch)		Employer (See Instructions) MAMCO - Mid Atlantic
Date 02/06/2026	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 (II)		Employer (See Instructions) Associa Hill Country
Date 02/20/2026	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 (II)		Employer (See Instructions) Associa Hill Country
Date 01/30/2026	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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 110/154 Rpt: 113/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROBY, GREGORY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Alexandria, VA 22311		
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Legum & Norman Realty Inc.
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ratliff, Annette	Amount of Contribution (\$) \$26.00
Contributor address; City; State; Zip Code Garland, TX 75044		
Principal occupation / Job title (See Instructions) Chief of Staff		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ratliff, Annette	Amount of Contribution (\$) \$26.00
Contributor address; City; State; Zip Code Garland, TX 75044		
Principal occupation / Job title (See Instructions) Chief of Staff		Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reichart, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Morris Plains, NJ 07950		
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) CMC NJ
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reichart, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Morris Plains, NJ 07950		
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		Employer (See Instructions) CMC NJ

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 111/154 Rpt: 114/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Remillard, Reid <hr/> 6 Contributor address; City; State; Zip Code Epping, NH 03042	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Evergreen Harvard Group LLC
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Remillard, Reid <hr/> Contributor address; City; State; Zip Code Epping, NH 03042	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Evergreen Harvard Group LLC
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhoades, Kendra <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Acctng-Dir (CSSC)		Employer (See Instructions) CSSC
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhoades, Kendra <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Acctng-Dir (CSSC)		Employer (See Instructions) CSSC
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Benjamin <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28226	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Community Association Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 112/154 Rpt: 115/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhodes, Benjamin <hr/> 6 Contributor address; City; State; Zip Code Charlotte, NC 28226	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Community Association Mgmt Svc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhymer, Natalie <hr/> Contributor address; City; State; Zip Code Morganton, NC 28655	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR-Dir		Employer (See Instructions) Heritage Property Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhymer, Natalie <hr/> Contributor address; City; State; Zip Code Morganton, NC 28655	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) HR-Dir		Employer (See Instructions) Heritage Property Mgmt Svc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richmond, Rachel <hr/> Contributor address; City; State; Zip Code Houston, TX 77080	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) General Mgr (II)		Employer (See Instructions) Principal Mgmt Group Houston
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richmond, Rachel <hr/> Contributor address; City; State; Zip Code Houston, TX 77080	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		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: 113/154 Rpt: 116/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rieta, Tiffany <hr/> 6 Contributor address; City; State; Zip Code Mililani, HI 96789	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Associa Hawaii
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rieta, Tiffany <hr/> Contributor address; City; State; Zip Code Mililani, HI 96789	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Associa Hawaii
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riska, Charles <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riska, Charles <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$55.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritter, Paula <hr/> Contributor address; City; State; Zip Code Reno, NV 89509	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Acctng-Mgr (Branch)		Employer (See Instructions) Associa Nevada South

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 114/154 Rpt: 117/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	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 01/30/2026	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 02/06/2026	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 02/13/2026	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 02/20/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 115/154 Rpt: 118/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	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 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Samuel <hr/> Contributor address; City; State; Zip Code Palm Desert, CA 92211	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Yvonne <hr/> Contributor address; City; State; Zip Code Houston, TX 77040	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Admin-Office-Mgr		Employer (See Instructions) Principal Mgmt Group Houston
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Yvonne <hr/> Contributor address; City; State; Zip Code Houston, TX 77040	Amount of Contribution (\$) \$6.00
Principal occupation / Job title (See Instructions) Admin-Office-Mgr		Employer (See Instructions) Principal Mgmt Group Houston
Date 01/30/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 116/154 Rpt: 119/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronan, Ashleigh <hr/> 6 Contributor address; City; State; Zip Code Gainesville, GA 30506	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Facilities-Dir		9 Employer (See Instructions) Radius Construction Group Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Bryce <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$7.77
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Bryce <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$7.77
Principal occupation / Job title (See Instructions) Ops-VP		Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	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 02/13/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 117/154 Rpt: 120/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruff, Christine <hr/> 6 Contributor address; City; State; Zip Code Chicago, IL 60609	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Admin-Asst		9 Employer (See Instructions) Associa Chicagoland
Date 02/13/2026	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 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Kristen <hr/> Contributor address; City; State; Zip Code Royse City, TX 75189	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) PMG North Texas
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Kristen <hr/> Contributor address; City; State; Zip Code Royse City, TX 75189	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-VP-Sr		Employer (See Instructions) PMG North Texas
Date 02/06/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/154 Rpt: 121/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rust, Maria <hr/> 6 Contributor address; City; State; Zip Code Arlington, TX 76005	7 Amount of Contribution (\$) \$7.00
8 Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		9 Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	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 (\$) \$4.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Northern California
Date 02/13/2026	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 (\$) \$4.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Northern California
Date 01/30/2026	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) Ops-VP (Branch)		Employer (See Instructions) The Prescott Companies Inc
Date 02/13/2026	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) Ops-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: 119/154 Rpt: 122/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Karen 6 Contributor address; City; State; Zip Code Houston, TX 77084	7 Amount of Contribution (\$) \$4.00
8 Principal occupation / Job title (See Instructions) Client Acctng-Spec		9 Employer (See Instructions) Principal Mgmt Group Houston
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanchez, Karen 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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santangelo, Paula Contributor address; City; State; Zip Code Norristown, PA 19403	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Mid Atlantic Management Corp
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santangelo, Paula Contributor address; City; State; Zip Code Norristown, PA 19403	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Mid Atlantic Management Corp
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schemanske, Lisa 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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/154 Rpt: 123/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schemanske, Lisa <hr/> 6 Contributor address; City; State; Zip Code South Lyon, MI 48178	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Kramer Triad Management Group
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Christine <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75089	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Marketing-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Christine <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75089	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Marketing-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmitt, Laura <hr/> Contributor address; City; State; Zip Code East Walpole, MA 02032	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Dartmouth
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmitt, Laura <hr/> Contributor address; City; State; Zip Code East Walpole, MA 02032	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Dartmouth

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/154 Rpt: 124/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/26/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Petra <hr/> 6 Contributor address; City; State; Zip Code New York, NY 10025	7 Amount of Contribution (\$) \$2.50
8 Principal occupation / Job title (See Instructions) Property Manager		9 Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Petra <hr/> Contributor address; City; State; Zip Code New York, NY 10025	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Petra <hr/> Contributor address; City; State; Zip Code New York, NY 10025	Amount of Contribution (\$) \$2.50
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 01/30/2026	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 02/13/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/154 Rpt: 125/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	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 02/13/2026	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 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shafranski, Nicholas <hr/> Contributor address; City; State; Zip Code Eden Prairie, MN 55344	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Minnesota
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shafranski, Nicholas <hr/> Contributor address; City; State; Zip Code Eden Prairie, MN 55344	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Minnesota
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shah, Aakash <hr/> Contributor address; City; State; Zip Code Austin, TX 78753	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Collections-Spec		Employer (See Instructions) CSSC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/154 Rpt: 126/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shah, Aakash <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78753	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Collections-Spec		9 Employer (See Instructions) CSSC
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapard, Catherine <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28277	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Community Association Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shapard, Catherine <hr/> Contributor address; City; State; Zip Code Charlotte, NC 28277	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Community Association Mgmt Svc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shekhar, Vedavathi <hr/> Contributor address; City; State; Zip Code Glen Allen, VA 23059	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Community Group Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shekhar, Vedavathi <hr/> Contributor address; City; State; Zip Code Glen Allen, VA 23059	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Admin-Asst		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: 124/154 Rpt: 127/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Gary <hr/> 6 Contributor address; City; State; Zip Code Gaithersburg, MD 20878	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) Comsource Management Inc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon, Gary <hr/> Contributor address; City; State; Zip Code Gaithersburg, MD 20878	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Comsource Management Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siouville, Andrew <hr/> Contributor address; City; State; Zip Code Apex, NC 27539	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) H.R.W. INC.
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siouville, Andrew <hr/> Contributor address; City; State; Zip Code Apex, NC 27539	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) H.R.W. INC.
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skelley, Stephanie <hr/> Contributor address; City; State; Zip Code La Grange, IL 60525	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		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: 125/154 Rpt: 128/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skelley, Stephanie <hr/> 6 Contributor address; City; State; Zip Code La Grange, IL 60525	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Regional)		9 Employer (See Instructions) Associa Chicagoland
Date 02/06/2026	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 (\$) \$23.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Principal Mgmt Group Houston
Date 02/20/2026	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 (\$) \$23.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Principal Mgmt Group Houston
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloan, Sarai <hr/> Contributor address; City; State; Zip Code Bacliff, TX 77518	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Office-Mgr		Employer (See Instructions) Houston Community Mgmt Service
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sloan, Sarai <hr/> Contributor address; City; State; Zip Code Bacliff, TX 77518	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Office-Mgr		Employer (See Instructions) Houston Community Mgmt Service

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/154 Rpt: 129/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	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 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Gregory <hr/> Contributor address; City; State; Zip Code Lodi, CA 95240	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Training-Dir		Employer (See Instructions) Associa Northern California
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soto, Vanessa <hr/> Contributor address; City; State; Zip Code Indio, CA 92203	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Desert Resort Management
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soto, Vanessa <hr/> Contributor address; City; State; Zip Code Indio, CA 92203	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Desert Resort Management
Date 01/30/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/154 Rpt: 130/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	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 02/06/2026	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) Community-VP (Branch)		Employer (See Instructions) Community Group Inc
Date 02/20/2026	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) Community-VP (Branch)		Employer (See Instructions) Community Group Inc
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Amy <hr/> Contributor address; City; State; Zip Code Hampton, VA 23666	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Community Group Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephens, Amy <hr/> Contributor address; City; State; Zip Code Hampton, VA 23666	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		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: 128/154 Rpt: 131/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stonestreet, Maura <hr/> 6 Contributor address; City; State; Zip Code Wrightsville Beach, NC 28480	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Ops-Analyst		9 Employer (See Instructions) Community Association Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stonestreet, Maura <hr/> Contributor address; City; State; Zip Code Wrightsville Beach, NC 28480	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-Analyst		Employer (See Instructions) Community Association Mgmt Svc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoutamire, Danielle <hr/> Contributor address; City; State; Zip Code Dawsonville, GA 30534	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Homeside Properties
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoutamire, Danielle <hr/> Contributor address; City; State; Zip Code Dawsonville, GA 30534	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Homeside Properties
Date 02/06/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/154 Rpt: 132/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sturges, Shelley <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75243	7 Amount of Contribution (\$) \$6.00
8 Principal occupation / Job title (See Instructions) Legal-Mgr		9 Employer (See Instructions) Corporate Headquarters
Date 02/06/2026	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 02/20/2026	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 01/30/2026	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 02/13/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/154 Rpt: 133/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/26/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sussewell, Thomas <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11230	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sussewell, Thomas <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11230	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Choice NY Property Management
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sussewell, Thomas <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11230	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Choice NY Property Management
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swain, Rebecca <hr/> Contributor address; City; State; Zip Code Monroe, GA 30656	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Heritage Property Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swain, Rebecca <hr/> Contributor address; City; State; Zip Code Monroe, GA 30656	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Community-VP (Branch)		Employer (See Instructions) Heritage Property Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/154 Rpt: 134/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Andrea <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75214	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Legal-VP		9 Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swift, Andrea <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Legal-VP		Employer (See Instructions) Corporate Headquarters
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sykora, Ginny <hr/> Contributor address; City; State; Zip Code New Hope, MN 55428	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Minnesota
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sykora, Ginny <hr/> Contributor address; City; State; Zip Code New Hope, MN 55428	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Associa Minnesota
Date 01/30/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/154 Rpt: 135/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Szatmari, Darla <hr/> 6 Contributor address; City; State; Zip Code Las Vegas, NV 89130	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Admin-Asst		9 Employer (See Instructions) Associa Nevada South
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TWYMAN, NATIA <hr/> Contributor address; City; State; Zip Code GAITHERSBURG, MD 20877	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Community Association Services
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TWYMAN, NATIA <hr/> Contributor address; City; State; Zip Code GAITHERSBURG, MD 20877	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Community Association Services
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabanou, Sue <hr/> Contributor address; City; State; Zip Code Tomball, TX 77375	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Rec-Dir		Employer (See Instructions) Principal Mgmt Group Houston
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tabanou, Sue <hr/> Contributor address; City; State; Zip Code Tomball, TX 77375	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Rec-Dir		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: 133/154 Rpt: 136/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Takahashi, Satoko <hr/> 6 Contributor address; City; State; Zip Code Wailuku, HI 96793	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Acctant (I)		9 Employer (See Instructions) Pacific Breeze Properties
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Takahashi, Satoko <hr/> Contributor address; City; State; Zip Code Wailuku, HI 96793	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Acctant (I)		Employer (See Instructions) Pacific Breeze Properties
Date 01/30/2026	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 02/13/2026	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 02/06/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/154 Rpt: 137/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	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 02/06/2026	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) Ops-Dir		Employer (See Instructions) PMG North Texas
Date 02/20/2026	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) Ops-Dir		Employer (See Instructions) PMG North Texas
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teran, Isabel <hr/> Contributor address; City; State; Zip Code Houston, TX 77088	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Principal Mgmt Group Houston
Date 02/20/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/154 Rpt: 138/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Carol <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75081	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Acctng-Spec (I)		9 Employer (See Instructions) CSSC
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, Carol <hr/> Contributor address; City; State; Zip Code Richardson, TX 75081	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Acctng-Spec (I)		Employer (See Instructions) CSSC
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Theodoulou, Katheryne <hr/> Contributor address; City; State; Zip Code Manchester, NH 03102	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Evergreen Harvard Group LLC
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Theodoulou, Katheryne <hr/> Contributor address; City; State; Zip Code Manchester, NH 03102	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Evergreen Harvard Group LLC
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thermidor, Jackie <hr/> Contributor address; City; State; Zip Code Parlin, NJ 08859	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) CMC NJ

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/154 Rpt: 139/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thermidor, Jackie <hr/> 6 Contributor address; City; State; Zip Code Parlin, NJ 08859	7 Amount of Contribution (\$) \$80.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) CMC NJ
Date 02/06/2026	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 02/20/2026	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 02/06/2026	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 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Patrick <hr/> Contributor address; City; State; Zip Code Bluffton, SC 29910	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) Association Services Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 137/154 Rpt: 140/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tinoco, Rosario <hr/> 6 Contributor address; City; State; Zip Code La Mirada, CA 90638	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Client Acctng-Spec		9 Employer (See Instructions) PCM California
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tinoco, Rosario <hr/> Contributor address; City; State; Zip Code La Mirada, CA 90638	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) PCM California
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Melisa <hr/> Contributor address; City; State; Zip Code Rancho Mirage, CA 92270	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Melisa <hr/> Contributor address; City; State; Zip Code Rancho Mirage, CA 92270	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 01/30/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/154 Rpt: 141/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trella, Aaron	7 Amount of Contribution (\$) \$1.00
6 Contributor address; City; State; Zip Code Plano, TX 75023		
8 Principal occupation / Job title (See Instructions) Acctant-Sr (III)		9 Employer (See Instructions) CSSC
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsitos, John	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chantilly, VA 20151		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) CMC Virginia
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tsitos, John	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Chantilly, VA 20151		
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) CMC Virginia
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Alexandra	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Palmetto, FL 34221		
Principal occupation / Job title (See Instructions) Sales-VP (Regional)		Employer (See Instructions) Associa Gulf Coast Inc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Alexandra	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Palmetto, FL 34221		
Principal occupation / Job title (See Instructions) Sales-VP (Regional)		Employer (See Instructions) Associa Gulf Coast Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/154 Rpt: 142/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urbina, Claudia <hr/> 6 Contributor address; City; State; Zip Code Brunswick, MD 21716	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (I)		9 Employer (See Instructions) Comsource Management Inc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urbina, Claudia <hr/> Contributor address; City; State; Zip Code Brunswick, MD 21716	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Comsource Management Inc
Date 02/06/2026	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 02/20/2026	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 02/06/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 140/154 Rpt: 143/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Jaime	7 Amount of Contribution (\$) \$11.00
6 Contributor address; City; State; Zip Code Gainesville, VA 20155		
8 Principal occupation / Job title (See Instructions) Ops-Analyst-Sr		9 Employer (See Instructions) CMC Virginia
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Horn, Dominick	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Shamong, NJ 08088		
Principal occupation / Job title (See Instructions) Field Serv-Dir		Employer (See Instructions) MAMCO - Mid Atlantic
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Horn, Dominick	Amount of Contribution (\$) \$1.00
Contributor address; City; State; Zip Code Shamong, NJ 08088		
Principal occupation / Job title (See Instructions) Field Serv-Dir		Employer (See Instructions) MAMCO - Mid Atlantic
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanbenschoten, Kristina	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Fredericksburg, VA 22407		
Principal occupation / Job title (See Instructions) Acctng-Mgr (Branch)		Employer (See Instructions) Community Group Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanbenschoten, Kristina	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Fredericksburg, VA 22407		
Principal occupation / Job title (See Instructions) Acctng-Mgr (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: 141/154 Rpt: 144/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varghese, Rinu <hr/> 6 Contributor address; City; State; Zip Code Missouri City, TX 77459	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) IT-Adminstr-VP		9 Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varghese, Rinu <hr/> Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) IT-Adminstr-VP		Employer (See Instructions) Corporate Headquarters
Date 02/06/2026	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) Real Estate-VP		Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	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) Real Estate-VP		Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	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) Trainer		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: 142/154 Rpt: 145/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	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) Trainer		9 Employer (See Instructions) Homeside Properties
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vest, Kristin <hr/> Contributor address; City; State; Zip Code Vineland, NJ 08360	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) CMC NJ
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vest, Kristin <hr/> Contributor address; City; State; Zip Code Vineland, NJ 08360	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) CMC NJ
Date 01/30/2026	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 02/13/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/154 Rpt: 146/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	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 02/13/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, KIMBERLY <hr/> Contributor address; City; State; Zip Code ANNANDALE, VA 22003	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, KIMBERLY <hr/> Contributor address; City; State; Zip Code ANNANDALE, VA 22003	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Catherine <hr/> Contributor address; City; State; Zip Code Hillsville, VA 24343	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) Community Association Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/154 Rpt: 147/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Catherine <hr/> 6 Contributor address; City; State; Zip Code Hillsville, VA 24343	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Branch)		9 Employer (See Instructions) Community Association Mgmt Svc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tollan <hr/> Contributor address; City; State; Zip Code Hillsville, VA 24343	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Acctng-Clerk		Employer (See Instructions) Community Association Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Tollan <hr/> Contributor address; City; State; Zip Code Hillsville, VA 24343	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Acctng-Clerk		Employer (See Instructions) Community Association Mgmt Svc
Date 01/30/2026	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 02/13/2026	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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/154 Rpt: 148/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Darci <hr/> 6 Contributor address; City; State; Zip Code Blaine, MN 55449	7 Amount of Contribution (\$) \$1.00
8 Principal occupation / Job title (See Instructions) Community-Dir (Branch)		9 Employer (See Instructions) Cities Management Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Darci <hr/> Contributor address; City; State; Zip Code Blaine, MN 55449	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Community-Dir (Branch)		Employer (See Instructions) Cities Management Inc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagy-Shirley, Kristina <hr/> Contributor address; City; State; Zip Code Wilmington, NC 28409	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Community Association Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagy-Shirley, Kristina <hr/> Contributor address; City; State; Zip Code Wilmington, NC 28409	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (I)		Employer (See Instructions) Community Association Mgmt Svc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wait, Morgan <hr/> Contributor address; City; State; Zip Code Euless, TX 76040	Amount of Contribution (\$) \$3.00
Principal occupation / Job title (See Instructions) Bus-Analyst		Employer (See Instructions) CSSC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 146/154 Rpt: 149/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wait, Morgan <hr/> 6 Contributor address; City; State; Zip Code Eules, TX 76040	7 Amount of Contribution (\$) \$3.00
8 Principal occupation / Job title (See Instructions) Bus-Analyst		9 Employer (See Instructions) CSSC
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waitt, Debra <hr/> Contributor address; City; State; Zip Code Derry, NH 03038	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Evergreen Harvard Group LLC
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waitt, Debra <hr/> Contributor address; City; State; Zip Code Derry, NH 03038	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Admin-Asst		Employer (See Instructions) Evergreen Harvard Group LLC
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Jordyn <hr/> Contributor address; City; State; Zip Code St. Michael, MN 55376	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-Mgr		Employer (See Instructions) Cities Management Inc
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Jordyn <hr/> Contributor address; City; State; Zip Code St. Michael, MN 55376	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Ops-Mgr		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: 147/154 Rpt: 150/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallis, Clint	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Flower Mound, TX 75028	
8 Principal occupation / Job title (See Instructions) Real Estate-VP-Sr		9 Employer (See Instructions) Corporate Headquarters
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallis, Clint	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Flower Mound, TX 75028	
Principal occupation / Job title (See Instructions) Real Estate-VP-Sr		Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, John	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cathedral City, CA 92234	
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walters, John	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Cathedral City, CA 92234	
Principal occupation / Job title (See Instructions) General Mgr (I)		Employer (See Instructions) Desert Resort Management
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Debra	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code San Rafael, CA 94901	
Principal occupation / Job title (See Instructions) Training-VP		Employer (See Instructions) N N Jaeschke Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/154 Rpt: 151/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warren, Debra	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code San Rafael, CA 94901		
8 Principal occupation / Job title (See Instructions) Training-VP		9 Employer (See Instructions) N N Jaeschke Inc
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Daryl	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Glenn Heights, TX 75154		
Principal occupation / Job title (See Instructions) Bus-Analyst		Employer (See Instructions) CSSC
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watts, Daryl	Amount of Contribution (\$) \$3.00
Contributor address; City; State; Zip Code Glenn Heights, TX 75154		
Principal occupation / Job title (See Instructions) Bus-Analyst		Employer (See Instructions) CSSC
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wecksler, Stephen	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Alpharetta, GA 30004		
Principal occupation / Job title (See Instructions) Sales-Dir (Regional)		Employer (See Instructions) Homeside Properties
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wecksler, Stephen	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Alpharetta, GA 30004		
Principal occupation / Job title (See Instructions) Sales-Dir (Regional)		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: 149/154 Rpt: 152/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 01/30/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiger, Vikki <hr/> 6 Contributor address; City; State; Zip Code Canton, GA 30115	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) Community-Mgr (II)		9 Employer (See Instructions) Homeside Properties
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiger, Vikki <hr/> Contributor address; City; State; Zip Code Canton, GA 30115	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Community-Mgr (II)		Employer (See Instructions) Homeside Properties
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Kevin <hr/> Contributor address; City; State; Zip Code Sewell, NJ 08080	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) MAMCO - Mid Atlantic
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Kevin <hr/> Contributor address; City; State; Zip Code Sewell, NJ 08080	Amount of Contribution (\$) \$1.00
Principal occupation / Job title (See Instructions) Client Acctng-Spec		Employer (See Instructions) MAMCO - Mid Atlantic
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, James <hr/> Contributor address; City; State; Zip Code Georgetown, TX 78633	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Ops-VP (Regional)		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: 150/154 Rpt: 153/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, James <hr/> 6 Contributor address; City; State; Zip Code Georgetown, TX 78633	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Ops-VP (Regional)		9 Employer (See Instructions) Corporate Headquarters
Date 01/30/2026	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) General Mgr (III)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 02/13/2026	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) General Mgr (III)		Employer (See Instructions) Legum & Norman Realty Inc.
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Nealie <hr/> Contributor address; City; State; Zip Code Hampstead, NC 28443	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Community Association Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Nealie <hr/> Contributor address; City; State; Zip Code Hampstead, NC 28443	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Bus Devolp-Mgr		Employer (See Instructions) Community Association Mgmt Svc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 151/154 Rpt: 154/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Temka <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75232	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Database-Assc		9 Employer (See Instructions) CSSC
Date 01/30/2026	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 02/13/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiltshire, Heather <hr/> Contributor address; City; State; Zip Code Prescott Valley, AZ 86315	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) N N Jaeschke Inc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wiltshire, Heather <hr/> Contributor address; City; State; Zip Code Prescott Valley, AZ 86315	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Ops-VP (Branch)		Employer (See Instructions) N N Jaeschke Inc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/154 Rpt: 155/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woody, Michelle <hr/> 6 Contributor address; City; State; Zip Code Richmond, VA 23222	7 Amount of Contribution (\$) \$2.00
8 Principal occupation / Job title (See Instructions) HR-Mgr		9 Employer (See Instructions) Community Group Inc
Date 02/20/2026	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 (\$) \$2.00
Principal occupation / Job title (See Instructions) HR-Mgr		Employer (See Instructions) Community Group Inc
Date 01/30/2026	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 02/13/2026	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 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wunsch, Alan <hr/> Contributor address; City; State; Zip Code Danbury, CT 06810	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Community-Pres (Branch)		Employer (See Instructions) REI Property and Asset Mgmt

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 153/154 Rpt: 156/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/13/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wunsch, Alan <hr/> 6 Contributor address; City; State; Zip Code Danbury, CT 06810	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Community-Pres (Branch)		9 Employer (See Instructions) REI Property and Asset Mgmt
Date 01/26/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Xhuglini, Estera <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11217	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Property Accountant		Employer (See Instructions) Choice NY Property Management
Date 02/06/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Xhuglini, Estera <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11217	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Property Accountant		Employer (See Instructions) Choice NY Property Management
Date 02/20/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Xhuglini, Estera <hr/> Contributor address; City; State; Zip Code Brooklyn, NY 11217	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Property Accountant		Employer (See Instructions) Choice NY Property Management
Date 01/26/2026	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 (\$) \$10.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 154/154 Rpt: 157/157
2 FILER NAME Associations, Inc. PAC		3 Filer ID (Ethics Commission Filers) 00067908
4 Date 02/06/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yasonia-Murphy, Nicholas <hr/> 6 Contributor address; City; State; Zip Code Brooklyn, NY 11228	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Property Manager		9 Employer (See Instructions) Choice NY Property Management
Date 02/20/2026	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 (\$) \$10.00
Principal occupation / Job title (See Instructions) Property Manager		Employer (See Instructions) Choice NY Property Management
Date 01/30/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yopp, Walter <hr/> Contributor address; City; State; Zip Code Asheville, NC 28803	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Finance-VP (Branch)		Employer (See Instructions) Community Association Mgmt Svc
Date 02/13/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yopp, Walter <hr/> Contributor address; City; State; Zip Code Asheville, NC 28803	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Finance-VP (Branch)		Employer (See Instructions) Community Association Mgmt Svc