

Bento, Priscylla

From: David Lehde <david.lehde@dallasbuilders.com>
Sent: Friday, November 8, 2019 10:27 AM
To: Bento, Priscylla
Subject: Filing Report of HPAC of the HBA of Greater Dallas
Attachments: HOME PAC of The HBA of Greater Dallas.pdf

RECEIVED

2019 NOV -8 AM 11:18

CITY SECRETARY
DALLAS, TEXAS**External Email!**

Attached is the recent report.
Sending on behalf of Treasurer

David W. Lehde
Director of Government Affairs

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MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT		FORM MPAC COVER SHEET PG 1	
The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00017315	2 Total pages filed: 4
3 COMMITTEE NAME HOMEPAC of the HBA of Greater Dallas		OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		Date Received ELECTRONICALLY FILED 10/28/2019	
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 5816 W. Plano Pkwy. #101 Plano, TX 75093-4636		Date Hand-delivered or Date Postmarked	
5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Mr. Phil NICKNAME LAST SUFFIX Crone		Receipt # Amount	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 6518 Trammel Dr Dallas, TX 75214		Date Processed	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		Date Imaged	
STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5816 W. Plano Pkwy. Plano, TX 75093		Dallas, TEXAS	
8 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION (214) 624-3178			
9 REPORT TYPE <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)			
10 MONTHLY REPORT FILING DEADLINE <input type="checkbox"/> January 5 <input type="checkbox"/> February 5 <input type="checkbox"/> March 5 <input type="checkbox"/> April 5 <input type="checkbox"/> May 5 <input type="checkbox"/> June 5 <input type="checkbox"/> July 5 <input type="checkbox"/> August 5 <input type="checkbox"/> September 5 <input checked="" type="checkbox"/> November 5 <input type="checkbox"/> December 5			
11 PERIOD COVERED Month Day Year 09/26/2019		THROUGH Month Day Year 10/25/2019	
GO TO PAGE 2			

**MONTHLY FILING GPAC REPORT:
PURPOSE AND TOTALS**

**FORM MPAC
COVER SHEET PG 2**

12 COMMITTEE NAME HOMEPAC of the HBA of Greater Dallas	13 Filer ID (Ethics Commission Filers) 00017315
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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) <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)	\$	350.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$10 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	24,344.51
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. Phil Crone

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

**FORM MPAC
COVER SHEET PG 3**
3 of 4

17 COMMITTEE NAME HOME PAC of the HBA of Greater Dallas		18 Filer ID (Ethics Commission Filers) 00017315
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 350.00
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: 1/1 Rpt: 4/4
2 FILER NAME HOME PAC of the HBA of Greater Dallas		3 Filer ID (Ethics Commission Filers) 00017315
4 Date 09/26/2019	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chandler, Alexander (Mr.) 6 Contributor address; City; State; Zip Code Fort Worth, TX 76116	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) Alexander Chandler Realty
Date 10/25/2019	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mishler, Michael Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Builder		Employer (See Instructions) Mishler Builders