

# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM SPAC COVER SHEET PG 1

The SPAC INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed: 5
3 COMMITTEE NAME  Keep Arlington's dollars Here (KASH)		OFFICE USE ONLY 13 JUL 23 AM 9:35 RECEIVED CSO	
4 COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE # CITY: STATE: ZIP CODE  2206 Racquet Club Court Arlington, TX 76017		
5 CAMPAIGN TREASURER NAME  MS / MRS / MR FIRST MI Ms. Rebecca NICKNAME LAST SUFFIX Hatch	Receipt # Amount Date Processed Date Imaged		
6 CAMPAIGN TREASURER'S STREET ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE # CITY: STATE: ZIP CODE  142 E Cimarron Park Loop Buda, TX 78610		
7 CAMPAIGN TREASURER'S MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX: APT / SUITE # CITY: STATE: ZIP CODE  Same as above		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION  ( 512 ) 560-7754		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 limit <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year      Month Day Year 1 / 1 / 13      THROUGH      7 / 1 / 13		
11 ELECTION	ELECTION DATE      ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input checked="" type="checkbox"/> Special 11 / 5 / 13		
GO TO PAGE 2			

# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

## FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME: **Keep Arlington's dollars Here (KA\$H)** ACCOUNT # (Ethics Commission filers)

13 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.)

CANDIDATE

SUPPORT (Candidate or Measure)

OFFICEHOLDER

OPPOSE (Candidate or Measure)

ASSIST (Officeholder)

MEASURE

CANDIDATE / OFFICEHOLDER NAME

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

BALLOT IDENTIFICATION / #

ELECTION DATE  
Month Day Year  
11 / 5 / 13

DESCRIPTION  
local option alcohol petition/election

14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 198,062.50
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 0
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

15 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.

*Rebecca Hatch*  
Signature of campaign treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Rebecca Hatch, this the 15 day of July, 2013, to certify which, witness my hand and seal of office.

*[Signature]* Signature of officer administering oath  
 Bryan Poff Printed name of officer administering oath  
 Notary Title of officer administering oath

# CORPORATE OR LABOR ORGANIZATION CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

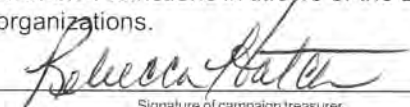
## SCHEDULE C

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> Total pages this Schedule C: <span style="float: right;">1</span>	
<b>2</b> FILER NAME Keep Arlington's Dollars Here (KA\$H)		<b>3</b> ACCOUNT # (Ethics Commission filers)	
<b>4</b> Date  3/4/13	<b>5</b> Corporation / Labor Organization name Texas Hospitality Association <hr/> <b>6</b> Corporation / Labor Organization address; City; State; Zip Code PO Box 26752 Austin, TX 78755	<b>7</b> Amount of contribution (\$)  68,687.50	<b>8</b> In-kind contribution description (if applicable) Texas Petition Strategies, Petition Signature Gathering, Consulting Services
Date  3/8/13	Corporation / Labor Organization name Texas Rangers <hr/> Corporation / Labor Organization address; City; State; Zip Code Arlington, TX	Amount of contribution (\$)  135,375	In-kind contribution description (if applicable) Texas Petition Strategies, Petition Signature Gathering, Consulting Services
Date	Corporation / Labor Organization name <hr/> Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name <hr/> Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name <hr/> Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name <hr/> Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Date	Corporation / Labor Organization name <hr/> Corporation / Labor Organization address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)

**ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED**

**AMENDMENT: APPOINTMENT OF A CAMPAIGN  
TREASURER BY A SPECIFIC-PURPOSE COMMITTEE**

**FORM ASTA  
PG 1**

See ASTA INSTRUCTION GUIDE for detailed instructions.		1 Total pages filed: 5	<b>OFFICE USE ONLY</b>	
2 COMMITTEE NAME Keep Arlington's Dollars Here (KA\$H)		3 ACCOUNT#		
4 COMMITTEE NAME	NEW			
5 COMMITTEE ADDRESS	NEW	ADDRESS / PO BOX:	APT / SUITE #:	CITY: STATE: ZIP CODE
6 CAMPAIGN TREASURER NAME	NEW	MS / MRS / MR:	FIRST	MI
		NICKNAME	LAST	SUFFIX
		Receipt #		Amount
Date Processed				
Date Imaged				
7 CAMPAIGN TREASURER STREET ADDRESS (Residence or business)	NEW	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE		
8 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> same as above	NEW	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE		
9 CAMPAIGN TREASURER PHONE	NEW	AREA CODE	PHONE NUMBER	EXTENSION
		( )		
10 PERSON APPOINTING TREASURER		FIRST	MI	LAST SUFFIX
		self		
11 SIGNATURE	I understand that I have been appointed as the campaign treasurer for this specific-purpose committee and that I am responsible for filing all required reports and that I may be subject to fines for failure to do so. I am aware of the restrictions in title 15 of the Election Code on contributions from corporations and labor organizations.			
	 Signature of campaign treasurer			
12 ASSISTANT CAMPAIGN TREASURER (see instructions)	NEW	FIRST	MI	LAST SUFFIX
		Rebecca	G.	Hatch
13 ASSISTANT CAMPAIGN TREASURER ADDRESS	NEW	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE		
		142 E Cimarron Park Loop Buda, TX 78610		
14 ASSISTANT CAMPAIGN TREASURER PHONE	NEW	AREA CODE	PHONE NUMBER	EXTENSION
		(512)	560-7754	

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**AMENDMENT: SPECIFIC-PURPOSE COMMITTEE  
PURPOSE AND MODIFIED REPORTING DECLARATION**

**FORM ASTA  
PG 2**

**15** COMMITTEE NAME  
Keep Arlington's Dollars Here (KA\$H)

<b>16</b> COMMITTEE PURPOSE	OFFICE USE ONLY
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<input type="checkbox"/> NEW <input type="checkbox"/> ADD  <input type="checkbox"/> SUPPORT CANDIDATE <input type="checkbox"/> OPPOSE CANDIDATE <input type="checkbox"/> ASSIST OFFICEHOLDER	CANDIDATE / OFFICEHOLDER NAME  OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)
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<input type="checkbox"/> NEW <input type="checkbox"/> ADD  <input checked="" type="checkbox"/> SUPPORT MEASURE <input type="checkbox"/> OPPOSE MEASURE	BALLOT IDENTIFICATION OF MEASURE / #	ELECTION DATE Month / Day / Year
DESCRIPTION Support Local Option Election		

**17**  
  
MODIFIED REPORTING DECLARATION

**NEW**

**COMPLETE THIS SECTION ONLY IF YOU ARE CHOOSING MODIFIED REPORTING.**

**\*\*This declaration must be filed no later than the 30th day before the first election to which the declaration applies. \*\***

**\*\*The modified reporting declaration is valid for one election cycle only. \*\***  
(An election cycle includes a primary election, a general election, and any related runoffs.)

The committee does not intend to accept more than \$500 in political contributions or make more than \$500 in political expenditures (excluding filing fees) in connection with any future election within the election cycle. The committee understands that if either one of those limits is exceeded, the committee's campaign treasurer will be required to file pre-election reports and, if necessary, a runoff report.

\_\_\_\_\_  
 Year of election(s) or election cycle to which declaration applies

\_\_\_\_\_  
 Signature of campaign treasurer

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

This appointment is effective on the date it is filed with the appropriate filing authority.