FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00043441 3 COMMITTEE NAME **OFFICE USE ONLY Texas GOP PAC** Date Received **ELECTRONICALLY FILED** 07/01/2023 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 230 Westcott Date Hand-delivered or Date Postmarked Suite 120 Change of Address Houston, TX 77007 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Kerin NAME NICKNAME LAST **SUFFIX** Pelfrey-Hedgcoxe STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 230 Westcott, Suite 120 STREET **ADDRESS** (Residence or Business) Houston, TX 77007 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 230 Westcott, Suite 120 MAILING **ADDRESS** Houston, TX 77007 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 980-4381 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2023 06/30/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)			
Texas GOP PAC			00043441				
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported The Honorable Orlando Sanch	ez TBD-Loca	I			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed					
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00			
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00			
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00			
	4. TOTAL POLITICA	L EXPENDITURES	\$	2,340.10			
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL LAST DAY OF THE	THE \$	0.00				
16 AFFIDAVIT	<u> </u>						
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.					
		Mrs. Kerin Pe	lfrey-Hedgcox	re			
Signature of Campaign Treasurer							
AFFIX NOTAR	Y STAMP / SEAL ABOVE						
Sworn to and subscribe	d before me, by the said	, tl	his the	day			
of	, 20, to certify	which, witness my hand and seal of office.					
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of offic	er administering oath			

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

				JV L.N.	3 of 5
		EE NAME PP PAC	18 Filer ID 00043441	(Ethics C	Commission Filers)
19 SCHE NAMI	EDULE E OF S	SUBTOTAL AMOUNT			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	2,340.10
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)							
Sch: 1/2 Rpt: 4/5	Texas GOP PAC 00043441							
4 Date	5 Payee name							
01/31/2023	Allegiance Bank							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$15.00	8800 Katy Freeway, Ste. 100							
Expenditure from corporate funds	Houston, TX 77024							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.							
	Check if Austin, TX, officeholder living expense bank fees							
	Bulk ices							
O Complete CNII V if divers	Candidate/Officeholder name Office cought Office hold							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
·								
Date	Payee name							
04/12/2023	Edmonds, Annette							
Amount (\$)	Payee address; City; State; Zip Code							
\$500.00	12418 Briar Forest Dr							
Expenditure from corporate funds	Houston, TX 77077							
PURPOSE								
OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T.							
EXPENDITURE	Check if Austin, TX, officeholder living expense							
	Consulting							
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/O	1							
Date	Payee name							
04/12/2023	Orlando Sanchez Campaign							
Amount (\$)	Payee address; City; State; Zip Code							
\$1,810.10	P.O. Box 130853							
\$1,010.10	F.O. BOX 130633							
Expenditure from								
corporate funds	Houston, TX 77219-0853							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.							
-	Candidate/Officeholder/Political Committee							
	Continuation							
Complete CNU V if all	Condidate/Officeholder name							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
· 								

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	mmittee	Legal Se	rds/Memorials Exervices struction Guid			xpense Vages/	Contract Labor		Travel Out of Di OTHER (enter a		t listed above)
1 To	otal pages Schedule F1:	2	FILER NAME							3	Filer ID	(Ethics C	Commission Filers)
	Sch: 2/2 Rpt: 5/5		Texas GOP								00043441		
4 Da	ate	5	Payee name										
03	3/31/2023		Stellar Bank	<									
6 Ar	mount (\$)	7	Payee addres	ss;	City;	State;	; Zip Co	de					
	\$15.00		P.O. Box 26	6017									
I , ,	Expenditure from												
Ш (corporate funds		Beaumont,										
8	PURPOSE OF		Category (Se			top of this sch	edule)	(b)	Description				
E	EXPENDITURE		Accounting/	Banki)	ng						de of Texas. Com		ule T.
									bank fees	1, 1 A,	officeholder living	j expense	
									bank ices				
9 Co	omplete <u>ONLY</u> if direct	<u> </u>	Candidate/Offi	aabald	or name		Office sou	abt			Office h	ald.	
ex	penditure to benefit C/OI	Η (Januluale/On	cenolu	ei name		Jilice Sou	gni			Office fi	alu	