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) 00086579 3 COMMITTEE NAME **OFFICE USE ONLY** Harris County Strong Date Received **ELECTRONICALLY FILED** 07/17/2023 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 56386 Date Hand-delivered or Date Postmarked Change of Address Houston, TX 77009 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Jason NAME NICKNAME LAST **SUFFIX** Cisneroz STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4517 Gano St. STREET **ADDRESS** (Residence or Business) Houston, TX 77009 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 56386 MAILING **ADDRESS** Houston, TX 77256-6386 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (832) 368-2042 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)
Harris County Strong	00086579
14 COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported	
(Attach lists on plain paper to complete this report if necessary.)	
Measures (Describe by date and location of election and nature of issue.) B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) check here if this report qualifies for the higher itemization threshold	\$ 0.00
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF	\$ 16,500.00
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS	\$ 0.00
4. TOTAL POLITICAL EXPENDITURES	\$ 60,995.76
CONTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE REPORTING PERIOD	F THE LAST DAY \$ 10,220.29
OUTSTANDING 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOAN TOTALS LAST DAY OF THE REPORTING PERIOD	ANS AS OF THE \$ 0.00
16 AFFIDAVIT	<u> </u>
	penalty of perjury, that the accompanying report is ludes all information required to be reported by me Code.
	Mr. Jason Cisneroz
Sig	gnature of Campaign Treasurer
AFFIX NOTARY STAMP / SEAL ABOVE	
Sworn to and subscribed before me, by the said	
of, 20, to certify which, witness my hand and seal of office	ice.
Signature of officer administering oath Printed name of officer administering o	path Title of officer administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

					3 of 9
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethics Co	mmission Filers)
l		unty Strong	00086579	(=::::00 00	
		E SUBTOTALS		l I	
l	ME OF	SUB	TOTAL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	15,500.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	1,000.00
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.		\$			
9. SCHEDULE E: LOANS					
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	50,401.66
11.	X	\$	10,594.10		
12.		\$			
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD					
14.		\$			
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL (CONTRIBUTIO	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/9	
2	FILER NAME Harris County Strong				3	Filer ID (Ethics Commission 00086579	on Filers)
4	Date 01/12/2023	Date 5 Full name of contributor out-of-state PAC (ID#:)			7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Houston, TX 77057 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> s)		
	· 	`	,				
	Date 03/31/2023	Full name of contributor First Tuesday PAC Contributor address; City; St)	•	Amount of Contribution (\$)	\$3,500.00
		Houston, TX 77006					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/03/2023 HillCo Partners, LLC Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$8,000.00	
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 03/31/2023	Full name of contributor Matthiesen, David Contributor address; City; St Houston, TX 77006)		Amount of Contribution (\$)	\$1,500.00
	Principal occu Attorney/Me	pation / Job title (See Instructions diator)	Employer (See Instructions Matthiesen & Associate			
	Date Full name of contributor out-of-state PAC (ID#:) 01/02/2023 Siegfried, Robert Contributor address; City; State; Zip Code Houston, TX 77070					Amount of Contribution (\$)	\$1,000.00
	Principal occu Engineer	pation / Job title (See Instructions)	Employer (See Instructions Siegfried Engineering &		onstruction LLC	

MONET	TARY POLITICAL CONTRIBUTION	NC	IS		SCHEDULE A1
The Instru	action Guide explains how to complete this	fori	m.	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/9
				3	Filer ID (Ethics Commission Filers) 00086579
Date 01/03/2023	 Full name of contributor	7	Amount of Contribution (\$) \$500.00		
Principal occu	Katy, TX 77494	l a	Employer (See Instructions	;) 	
Engineer	apation / Job title (See instructions)	9	IDCUS	·)	
	The Instru FILER NAME Harris Coun Date 01/03/2023	The Instruction Guide explains how to complete this factorial files (Instruction Guide explains how to complete this factorial files) FILER NAME Harris County Strong Date	The Instruction Guide explains how to complete this form FILER NAME Harris County Strong Date	Date 5 Full name of contributor out-of-state PAC (ID#:) 1/03/2023 Youhannazad, Sargon 6 Contributor address; City; State; Zip Code Katy, TX 77494 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	The Instruction Guide explains how to complete this form. FILER NAME Harris County Strong Date 01/03/2023 Contributor out-of-state PAC (ID#: 7 Youhannazad, Sargon Government Contributor State PAC (ID#: 7 Youhannazad, Sargon Government Contributor State PAC (ID#: 7 Youhannazad, Sargon Government Contributor State PAC (ID#: 7 Youhannazad, Sargon Frincipal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions)

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

	The Instruc	cti	on Guide explains how to complete this form.	1	Total pages Schedule C1: Sch: 1/1 Rpt: 6/9			
2	FILER NAME				3 Filer ID (Ethics Commission Filers)			
	Harris County Strong				00086579			
4	Date	5	Corporation / Labor Organization name	7	Amount of contribution (\$)			
	02/09/2023		Associated Testing Laboratories, Inc.		\$1,000.00			
		6	Corporation / Labor Organization address; City; State; Zip Code					
			Houston, TX 77054					

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 Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card F ayment		The Instruction Guide explains how to con	nple	ete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 1/2 Rpt: 7/9		Harris County Strong		00086579
4	Date	5	Payee name		
	01/02/2023		ActBlue		
6	Amount (\$)	7	Payee address; City; State; Zip Cod	de	
	\$59.25		366 Summer St.		
	- Formalitana forma				
L	Expenditure from corporate funds		Somerville, MD 02144		
8	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Online donation fees
					5 doi.u
9	Complete ONLY if direct	_	L Candidate/Officeholder name Office souc	aht	Office held
	expenditure to benefit C/OI			y	
H	Date	Т	Payee name		
	01/02/2023		Clements, Bill		
-	Amount (\$)	┢	Payee address; City; State; Zip Cod	de	
	\$1,000.00		3103 Cumberland Dr.		
	, _,				
	Expenditure from corporate funds		Missouri City, TX 77459		
	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Event Expense		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense Harris County Investiture event entertainment
					Traine County invocatare event emercaninent
	Complete ONLY if direct	_	L Candidate/Officeholder name Office soug	ght	Office held
	expenditure to benefit C/OI	Н			
F	Date	Π	Payee name		
	02/01/2023		Grant Martin Campaigns		
	Amount (\$)	┢	Payee address; City; State; Zip Coo	de	
	\$949.62		2383 Bush Street		
	Expenditure from corporate funds		San Francisco, CA 94115		
	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Printing Expense		Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense Harris County Investiture programs
					The state of the s
-	Complete ONLY if direct	Ц		aht	Office held
	expenditure to benefit C/OI		2	-	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ense Event Expense Loan Repayment/Reimbu

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/2 Rpt: 8/9	Harris County Strong	00086579
4 Date	5 Payee name	
05/24/2023	SMG-NRG Park	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$32,985.38	One NRG Park	
Expenditure from corporate funds	Houston, TX 77054	
8 PURPOSE OF	, -	(b) Description
EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Investiture for County officials
		,
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/OI		Ginee Held
Date	Payee name	
01/02/2023	Steele, Collin	
Amount (\$)	Payee address; City; State; Zip Co	de
\$3,000.00	547 Heights Blvd.	
	Apt. 22	
Expenditure from corporate funds	Houston, TX 77007	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Event management services
Operation ONE Wife discont	Oscalidate IOW sales Islanda and Sales	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
·		
Date	Payee name	
01/14/2023	Strong Strategies, LLC	
Amount (\$)	Payee address; City; State; Zip Co	de
\$12,407.41	325 W. 18th St.	
Expenditure from corporate funds	Houston, TX 77008	
PURPOSE	1	(b) Description
OF	Event Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
		Payment of expenses reported on Sched F2 on prior
		report
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI	1	

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 9/9 Harris County Strong 00086579 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 02/01/2023 Strong Strategies, LLC Amount (\$) Payee address; State; Zip Code \$10,594.10 325 W. 18th St. Expenditure from Houston, TX 77008 corporate funds TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Payments made for signage, photography and catering and event fee Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH