FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00028200 3 COMMITTEE NAME **OFFICE USE ONLY** Associated Builders & Contractors, Inc., Texas Coastal Bend PAC Date Received **ELECTRONICALLY FILED** 01/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 7433 Leopard St. Change of Address Corpus Christi, TX 78409 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Lance Scott NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Lewis CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2033 FM 2725 STREET **ADDRESS** (Residence or Business) Ingleside, TX 78362 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 2033 FM 2725 MAILING **ADDRESS** Change of Address Ingleside, TX 78362 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (361) 523-9992 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination

Month

11/26/2023

X January 5

February 5

Year

March 5

Day

10 MONTHLY

11 PERIOD

COVERED

REPORT FILING DEADLINE

April 5

May 5

June 5

THROUGH

July 5

August 5

September 5

Month

12/25/2023

Day

October 5

November 5

December 5

Year

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

			1	
L2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Associated Builders	& Contractors, Inc., Texas	s Coastal Bend PAC	00028200	
.4 COMMITTEE ACTIVITY	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	0. 14	A. Supported		
	Measures (Describe by date and location)	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION		D POLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS		OR GUARANTEES OF LOANS, OR //ADE ELECTRONICALLY)	\$	0.00
		qualifies for the higher itemization threshold		
	2. TOTAL POLITICA		\$	0.00
EVDENDITUDE	`	DGES, LOANS, OR GUARANTEES OF LOANS)		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	
				0.00
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		
OUTSTANDING	■ *	AMOUNT OF ALL OUTSTANDING LOANS AS OF		
LOAN TOTALS	LAST DAY OF THE	\$	0.00	
L6 AFFIDAVIT				
		I swear, or affirm, under penalty of particle and correct and includes all info under Title 15, Election Code.	perjury, that the a ormation required	ccompanying report is I to be reported by me
		Mallana	o Cook Louis	
			e Scott Lewis Campaign Treasu	ror
		Signature of C	zampaign measu	iei
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ned before me, by the said _		, this the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Olava at a f	- destricted and the second	Drinted access of efficiency labels in the	Tia 6 55	and a distribute state of the
Signature of officer	administering oath	Printed name of officer administering oath	little of offic	er administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				3 of 5
		EE NAME	18 Filer ID	(Ethics Commission Filers)
		d Builders & Contractors, Inc., Texas Coastal Bend PAC	00028200	
19 SCH NAM	EDULI E OF :	SUBTOTAL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 0.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00
3.	Х	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	OR	\$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPOR LABOR ORGANIZATION	ATION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORC	GANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	₹	\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9.	Х	SCHEDULE E: LOANS		\$ 0.00
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	IS	\$ 0.00
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUT	IONS	\$ 0.00
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUT	ONS	\$
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

						SCHEDULE B		
The Instruction Guide explains how to complete this form.				1	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5			
2 FILER N	2 FILER NAME			3	3 Filer ID (Ethics Commission Filers)			
Associa	ted Builders & Contractors, In	c., Texas Coastal Ben	d PAC		00028200	00028200		
4 TOTAL	. OF UNITEMIZED PLEDG	ES			\$	0.00		
5 Date	6 Full name of pledgorout-of-state PAC (ID#:		_) 8		n-kind description			
					pledge (\$)	(If applicable)		
	7 Pledgor Address;	City; State; Zip Coo	le		 			
					Check if travel outside of	Гехаs. Complete Schedule Т		
10 Principal	occupation / Job title (See Instru	ctions)	11 Employer (See In	nstructi		The second of th		
	occupation, occ and (occ mond	0.101	Employer (See in	isti ucti	ons			

	LOANS					SCHEDU	LE E
	The Instruction Guide explains how to complete this form			ages Schedule E: /1 Rpt: 5/5			
	2 FILER NAME Associated Builders & Contractors, Inc., Texas Coastal Bend PA			AC	3 Filer ID (Ethics Commission Filers) 00028200		
4	TOTAL OF UN	IITEMIZED LOANS			l	\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	.C (ID#:		9 Loan Amount (\$)	
	Is lender a financial institution?	8 Lender address; City	y; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instructio	ns)	•	
14	Description of Coll None	ateral		15 Check if personal funds were deposited into political account (See Instructions)			
	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guarante	ed (\$)
	not applicable	18 Guarantor address; City	y; State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instructio	ns)	1	