GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00060167	2 Total pages filed: 5		
3	COMMITTEE NAME		•	OFFICE USE ONLY		
	Suddenlink Texas	PAC		Date Received		
				01/16/2024		
				01/10/2024		
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CIT	Y; STATE; ZIP CODE			
		One Court Square 47th Floor		Date Hand-delivered or Date Postmarked		
	Change of Address					
		Long Island City, NY 11120		Receipt # Amount		
				Date Processed		
				Date Imaged		
5	CAMPAIGN	MS/MRS/MR FIRST		MI		
-	TREASURER	Mr. Lee				
	NAME					
		NICKNAME LAST		SUFFIX		
		Schroeder				
Schloeder						
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODE		
ľ	TREASURER	One Court Square West	,			
	STREET ADDRESS	47th Floor				
	(Residence or Business)	Long Island City, NY 11101				
ľ	CAMPAIGN TREASURER	STREET OR PO BOX;	APT / SUITE #; CITY	; STATE; ZIP CODE		
	MAILING	One Court Square 49th Floor				
	ADDRESS					
	Change of Address	Long Island City, NY 11120				
8	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION			
		(929) 418-4237				
9	REPORT TYPE	X January 15 30	Oth day before election	Dissolution (Attach PAC-DR)		
	TIPE		h day before election	10th day after campaign treasurer		
		July 15		termination		
			unoff			
10	PERIOD	Month Day Year	Month Day	Year		
	COVERED	07/01/2023 TH	HROUGH 12/31/2023	3		
11	ELECTION	ELECTION DATE	ELECTION TYPE			
		Month Day Year	Primary Runoff	Other		
			General Special			
		I I				
	GO TO PAGE 2					
For	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.0bfcfb67					

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)	
Suddenlink Texas PAC	00060167				
14 COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if	A. Supported			
	applicable, classify by party.)				
(Attach lists on plain		P. Opposed			
paper to complete this report if necessary.)		B. Opposed			
· · · · · · · · · · · · · · · · · · ·					
	0 Magauraa	A Supported			
	2. Measures (Describe by date and location	A. Supported			
	of election and nature of issue.)				
		B. Opposed			
		B. Opposed			
	3. Officeholders				
	Assisted				
	(Identify by name or, if				
	applicable, classify by party.)				
15 CONTRIBUTION		POLITICAL CONTRIBUTIONS (OTHER THAN			
TOTALS		OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY)	\$	0.00	
	check here if this report	qualifies for the higher itemization threshold			
	2. TOTAL POLITICA	L CONTRIBUTIONS	\$	0.00	
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	Ť	0.00	
EXPENDITURE	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES			
TOTALS			\$	0.00	
	4. TOTAL POLITICA		\$		
			•	0.00	
BALANCE	CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY BALANCE OF THE REPORTING PERIOD			0.00	
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 REPORTING PERIOD	HE \$	0.00	
16 AFFIDAVIT					
		I swear, or affirm, under penalty of pe	rium, that the a	acompanying report is	
		true and correct and includes all inform			
		under Title 15, Election Code.			
		Mr. Lee S	Schroeder		
		Signature of Car	npaign Treasur	er	
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed before me, by the said day					
of	, 20, to certify v	vhich, witness my hand and seal of office.			
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of office	er administering oath	
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SU	BT	OTALS - GPAC	C	OVE	FORM GPAC R SHEET PG 3 3 of 5
		EE NAME A Texas PAC	18 Filer ID 00060167	(Ethi	cs Commission Filers)
	19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	3. X SCHEDULE B: PLEDGED CONTRIBUTIONS			\$	0.00
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION				
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR 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.	Х	SCHEDULE E: LOANS		\$	0.00
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	0.00
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

PLEDGED CONTRIBUTIONS SCHEDULE B						
The Instruction Guide ex		1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5				
2 FILER NAME Altice USA Texas PAC		3 Filer ID (Eth 00060167	nics Commission Filers)			
⁴ TOTAL OF UNITEMIZED PLED	⁴ TOTAL OF UNITEMIZED PLEDGES			,	0.00	
5 Date 6 Full name of pledgor	6 Full name of pledgorout-of-state PAC (ID#:) 8 Amount of pledge (\$)			
7 Pledgor Address;	City; State; Zip Code			 		
			Check if travel out	I side of Texas. Complete Scher	dule T.	
10 Principal occupation / Job title (See Instru	uctions)	11 Employer (See Ins	tructions)			

LOANS SCHEDULE E							
The Instruction Guide explains how to complete this form.	ages Schedule E: '1 Rpt: 5/5						
2 FILER NAME Altice USA Texas PAC	3 Filer ID 000601	(Ethics Commissio	on Filers)				
⁴ TOTAL OF UNITEMIZED LOANS		\$	0.00				
5 Date of loan 7 Name of lender Out-of-state PAC (ID#:)	9 Loan Amount (\$)				
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest Rate					
		11 Maturity Date					
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions))	•					
14 Description of Collateral 15 Check if personal funds we None	15 Check if personal funds were deposited into political account (See Instructions)						
16 GUARANTOR 17 Name of guarantor INFORMATION 17 Name of guarantor		19 Amount Guara	nteed (\$)				
not applicable 18 Guarantor address; City; State; Zip Code							
20 Principal occupation 21 Employer (See Instructions)	1					