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) 00016106 3 COMMITTEE NAME **OFFICE USE ONLY** Houston Pilots PAC Fund Date Received **ELECTRONICALLY FILED** 01/12/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 205 Pennsylvania Ave., SE Date Hand-delivered or Date Postmarked Change of Address Washington, DC 20003 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. David NAME NICKNAME LAST **SUFFIX** Mason STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 205 Pennsylvania Ave., SE STREET **ADDRESS** (Residence or Business) Washington, DC 20003 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** P.O. Box 15441 MAILING **ADDRESS** Washington, DC 20003 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (202) 543-8345 x242 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 11/30/2023 12/31/2023 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)		
Houston Pilots PAC Fund			00016106		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Terry Canales State Represer	ntative		
(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			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE 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	POLITICAL EXPENDITURES	\$	0.00	
	4. TOTAL POLITICA	L EXPENDITURES	\$	5,000.00	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		DAY \$	72,451.12	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			0.00	
16 AFFIDAVIT			•		
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.			
		Mr. Dav	rid Mason		
		Signature of Ca	mpaign Treasurer		
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	before me, by the said	, tl	his the	day	
		which, witness my hand and seal of office.			
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of officer a	administering oath	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

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1 ago 0 01 10				
13 Filer ID (Ethics Commission Filers)	<u> </u>	12 COMMITTEE NAME		
00016106	AC Fund	Houston Pilots PAC Fund		
A. Supported Briscoe Cain State Representative	1. Candidates (Identify by name or, if applicable, classify by party.)	14 COMMITTEE ACTIVITY		
B. Opposed	his	(Attach lists on plain paper to complete this report if necessary.)		
A. Supported	Measures (Describe by date and location of election and nature of issue.)			
B. Opposed	В			
ty.)	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
A. Supported Harold Dutton Jr. State Representative	1. Candidates A	COMMITTEE		
	(Identify by name or, if applicable, classify by party.)	ACTIVITY		
B. Opposed	his	(Attach lists on plain paper to complete this report if necessary.)		
A. Supported	Measures (Describe by date and location of election and nature of issue.)			
B. Opposed	В			
tv.)	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
A. Supported Lacey Hull State Representative		COMMITTEE ACTIVITY		
B. Opposed	his	(Attach lists on plain paper to complete this report if necessary.)		
A. Supported	Measures (Describe by date and location of election and nature of issue.) A			
B. Opposed	В			
ty.)	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
A. Supported B. Opposed	2. Measures (Describe by date and location of election and nature of issue.) B 3. Officeholders Assisted	paper to complete this		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC **ADDENDUM**

			13 Filer ID	(=u · · · =u ·)
				(Ethics Commission Filers)
nd			00016106	
1. Candidates (Identify by name or, if applicable, classify by party.)		Mary Ann Perez State Represe	entative	
	B. Opposed			
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
	B. Opposed			
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
 		Mano DeAvala State Penresen	tativo	
		Wallo DeAyala State Represen	lative	
	B. Opposed			
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
	B. Opposed			
3. Officeholders Assisted				
applicable, classify by party.)				
	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Opposed 3. Opposed A. Supported B. Opposed B. Opposed	1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. 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. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported Mano DeAyala State Represent Mano DeA	A. Supported Mary Ann Perez State Representative A. Supported Mary Ann Perez State Representative

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

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			5 of 10	
E NAME	18 Filer ID	(Ethics Commis	sion Filers)	
ilots PAC Fund	00016106			
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00	
SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00	
SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00	
SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$		
SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$		
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$		
SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$		
SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$		
SCHEDULE E: LOANS		\$	0.00	
SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	5,000.00	
SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00	
SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00	
SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00	
SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	3,498.00	
	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4: EXPENDITURES FROM POLITICAL CONTRIBUTION SCHEDULE F5: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION SCHEDULE F6: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	III DESPACE FUND 00016106 SUBTOTALS SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED	ISOBTOTALS SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4: EXPENDITURES ROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED	

PLE	DGED CONTRIBU	TIONS				SCHEDULE B	
The Instruction Guide explains how to complete this form.				1	. Total pages Schedule B: Sch: 1/1 Rpt: 6/10		
2 FILER NAME Houston Pilots PAC Fund					Filer ID (Ethics Commission Filers) 00016106		
4 TOTAL	OF UNITEMIZED PLED	GES			\$	0.00	
5 Date	6 Full name of pledgor	out-of-state PAC (ID#:)	8	Amount of pledge (\$)	9 In-kind description (If applicable)	
	7 Pledgor Address;	City; State; Zip Code			_		
40.5: : .	(1) (2) (3)		Taa	<u> [</u>		tside of Texas. Complete Schedule T	
10 Principal	occupation / Job title (See Instru	ictions)	11 Employer (See Instru	ucti	ons)		

LOANS				SCHEDUI	LE E
The Instruction Guide explains how to complete this form.			1 Total pages Schedule E: Sch: 1/1 Rpt: 7/10		
2 FILER NAME Houston Pilots PAC Fund			3 Filer ID (Ethics Commission Filers) 00016106		
4 TOTAL OF UNITEMIZED LOANS			1	\$	0.00
5 Date of loan 7 Name of lender	out-of-state PA	C (ID#:)	9 Loan Amount (\$)	
6 Is lender a financial institution?	City; State;	Zip Code		10 Interest Rate	
				11 Maturity Date	
12 Principal occupation / Job title (See Instruct	ions)	13 Employer (See Instructions	s)	•	
14 Description of Collateral None		15 Check if personal funds we	ere deposited	d into political account (See Instructions)	
16 GUARANTOR INFORMATION 17 Name of guarantor				19 Amount Guarante	ed (\$)
not applicable 18 Guarantor address;	City; State;	Zip Code			
20 Principal occupation		21 Employer (See Instructions	5)	•	

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1 Total pages Schedule F1: Sch: 1/2 Rpt: 8/10	2 FILER NAME Houston Pilots PAC Fund 3 Filer ID (Ethics Commission Filers) 00016106
4 Date	5 Payee name
12/06/2023	Briscoe Cain Campaign
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code P.O. Box 7
Expenditure from corporate funds	Deer Park, TX 77536-0007
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Contribution to committee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
12/06/2023	Harold V. Dutton Jr. Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	3303 Main Street, Suite 303
Expenditure from corporate funds	Houston, TX 77002-9321
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.
EXPENDITORE	Candidate/Officeholder/Political Committee
	Contribution to committee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/06/2023	Lacey Hull for Texas
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	P.O. Box 19231
Ψ500.00	1.0. BOX 13231
Expenditure from corporate funds	Houston, TX 77224-9231
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Contribution to committee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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		
Credit Card r dyment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 2/2 Rpt: 9/10	Houston Pilots PAC Fund 00016106	
4 Date	5 Payee name	
12/06/2023	Mano DeAyala for State Representative	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$500.00	12335 Kingsride Lane #416	
Expenditure from corporate funds	Houston, TX 77024-4116	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
	Contribution to committee	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	
Date	Payee name	=
12/06/2023	Mary Ann Perez Campaign	
Amount (\$)	Payee address; City; State; Zip Code	_
\$500.00	PO Box 262432	
Expenditure from corporate funds	Houston, TX 77207-2432	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By	
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
	Contribution to committee	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	H	
Date	Payee name	=
12/04/2023	Terry Canales Campaign	
Amount (\$)	Payee address; City; State; Zip Code	_
\$2,500.00	2727 W. University	
Ψ2,000.00	Zizi W. Olivoisity	
Expenditure from	Edinburg TV 70520 7000	
corporate funds	Edinburg, TX 78539-7889	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
	Contribution to committee	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
		_

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 10/10 2 FILER NAME Filer ID (Ethics Commission Filers) Houston Pilots PAC Fund 00016106 8 Amount (\$) Date 5 Name of person from whom amount is received 11/30/2023 Cadence Bank \$998.00 6 Address of person from whom amount is received; City; State; Zip Code Tupelo, MS 38801 Purpose for which amount is received ☐ Check if political contribution returned to filer Refund of fraudulent transaction Amount (\$) Name of person from whom amount is received Date \$2,500.00 12/04/2023 Dawn Buckingham Campaign Address of person from whom amount is received; City; State; Zip Code Austin, TX 78734 Purpose for which amount is received X Check if political contribution returned to filer Voided check