

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

| | | | |
|--|--|--|----------------|
| 1 Filer ID (Ethics Commission Filers) 00016700 | 2 Total pages filed: 10 | OFFICE USE ONLY | |
| 3 COMMITTEE NAME South Texas Associated Builders & Contractors, Inc. PAC | Date Received ELECTRONICALLY FILED 02/02/2024 | | |
| 4 TREASURER NAME Schultz, Steven J. (Mr.) | Date Hand-delivered or Date Postmarked | | |
| 5 ORIGINAL REPORT TYPE | <input type="checkbox"/> January 15 | <input type="checkbox"/> Runoff | Receipt # |
| | <input checked="" type="checkbox"/> July 15 | <input type="checkbox"/> 10th day after campaign treasurer resignation | |
| | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Dissolution report | Amount |
| | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> Other (specify) _____ | Date Processed |
| 6 ORIGINAL PERIOD COVERED | Month Day Year | THROUGH | Month Day Year |
| | 01/01/2023 | | 06/30/2023 |
| 7 EXPLANATION OF CORRECTION | | | |

7 EXPLANATION OF CORRECTION
When auditing past PAC activity for the last three years, we discovered that 10 contributions were misreported or inadvertently omitted. This correction adds 8 contributions and 2 expenditures. As we made these corrections within 14 business days of discovery of the errors, we respectfully request that no penalty be assessed, or in the alternative, any penalties incurred be waived.

8 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. Steven J. Schultz

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

| | | | |
|---|---|---|--|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00016700 | 2 Total pages filed: 10 |
| 3 COMMITTEE NAME South Texas Associated Builders & Contractors, Inc. PAC | | OFFICE USE ONLY | |
| | | Date Received ELECTRONICALLY FILED 02/02/2024 | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 814 Arion Pkwy., Ste. 111 San Antonio, TX 78216 | | |
| | Date Hand-delivered or Date Postmarked | | |
| | Receipt # | Amount | |
| | Date Processed | | |
| | | Date Imaged | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST | MI |
| | Mr. | Steven J. | |
| | | NICKNAME | SUFFIX |
| | | LAST | Schultz |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 814 Arion Pkwy., Ste. 111 San Antonio, TX 78216 | | |
| | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 814 Arion Pkwy., Ste. 204 San Antonio, TX 78216 | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 814 Arion Pkwy., Ste. 111 San Antonio, TX 78216 | | |
| | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 814 Arion Pkwy., Ste. 204 San Antonio, TX 78216 | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION |
| | | (210) 342-1994 | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Dissolution (Attach PAC-DR) |
| | <input checked="" type="checkbox"/> July 15 | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> 10th day after campaign treasurer termination |
| | | <input type="checkbox"/> Runoff | |
| | | | |
| 10 PERIOD COVERED | Month Day Year | THROUGH | Month Day Year |
| | 01/01/2023 | | 06/30/2023 |
| 11 ELECTION | ELECTION DATE | | ELECTION TYPE |
| | Month Day Year | <input type="checkbox"/> Primary | <input type="checkbox"/> Runoff <input type="checkbox"/> Other |
| | | <input type="checkbox"/> General | <input type="checkbox"/> Special |
| | | | |

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

| | |
|---|---|
| 12 COMMITTEE NAME South Texas Associated Builders & Contractors, Inc. PAC | 13 Filer ID (Ethics Commission Filers) 00016700 |
|---|---|

| | | |
|---|--|--------------|
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) | 1. Candidates (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.) | A. Supported |
| | | B. Opposed |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | |

| | | | |
|-------------------------------|---|----|-----------|
| 15 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ | 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 914.55 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 9.21 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 26,302.02 |
| 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 perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Steven J. Schultz

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - GPAC

| | | |
|---|--|---|
| 17 COMMITTEE NAME South Texas Associated Builders & Contractors, Inc. PAC | | 18 Filer ID (Ethics Commission Filers) 00016700 |
| 19 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
| | NAME OF SCHEDULE | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 839.55 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 3. | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ 0.00 |
| 4. | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 5. | <input checked="" type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ 75.00 |
| 6. | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 7. | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 8. | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$ |
| 9. | <input checked="" type="checkbox"/> SCHEDULE E: LOANS | \$ 0.00 |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 9.21 |
| 11. | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 0.00 |
| 12. | <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ 0.00 |
| 13. | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ 0.00 |
| 14. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 15. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/2 Rpt: 5/10 |
| 2 FILER NAME South Texas Associated Builders & Contractors, Inc. PAC | | 3 Filer ID (Ethics Commission Filers) 00016700 |
| 4 Date 01/17/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, James (Mr.) | 7 Amount of Contribution (\$) \$200.00 |
| | 6 Contributor address; City; State; Zip Code Bulverde, TX 78163 | |
| 8 Principal occupation / Job title (See Instructions) President | | 9 Employer (See Instructions) Bartlett Cocke General Contractors |
| Date 01/17/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Builders & Contractors, INC. PAC ESCROW ACCOUNT | Amount of Contribution (\$) \$95.82 |
| | Contributor address; City; State; Zip Code Washington, DC 20001 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/17/2023 | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00010421) Associated Builders & Contractors, INC. PAC ESCROW ACCOUNT | Amount of Contribution (\$) \$47.91 |
| | Contributor address; City; State; Zip Code Washington, DC 20001 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/17/2023 | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00010421) Associated Builders & Contractors, INC. PAC ESCROW ACCOUNT | Amount of Contribution (\$) \$47.91 |
| | Contributor address; City; State; Zip Code Washington, DC 20001 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 01/17/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Builders & Contractors, INC. PAC ESCROW ACCOUNT | Amount of Contribution (\$) \$47.91 |
| | Contributor address; City; State; Zip Code Washington, DC 20001 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/2 Rpt: 6/10 |
| 2 FILER NAME South Texas Associated Builders & Contractors, Inc. PAC | | 3 Filer ID (Ethics Commission Filers) 00016700 |
| 4 Date 01/17/2023 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rios, Bobby (Mr.) <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209 | 7 Amount of Contribution (\$) \$200.00 |
| 8 Principal occupation / Job title (See Instructions) Business Development Mgr | | 9 Employer (See Instructions) Bartlett Cocke General Contractors |
| Date 01/17/2023 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, TJ (Mr.) <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78132 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) Senior Project Manager | | Employer (See Instructions) Bartlett Cocke General Contractors |

PLEGGED CONTRIBUTIONS

SCHEDULE B

| | | | |
|--|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule B: Sch: 1/1 Rpt: 7/10 | |
| 2 FILER NAME South Texas Associated Builders & Contractors, Inc. PAC | | 3 Filer ID (Ethics Commission Filers) 00016700 | |
| 4 TOTAL OF UNITEMIZED PLEDGES | | \$ 0.00 | |
| 5 Date | 6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) | 8 Amount of pledge (\$) | 9 In-kind description (If applicable) |
| | 7 Pledgor Address; City; State; Zip Code | | |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (See Instructions) | | 11 Employer (See Instructions) | |

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

| | | | |
|--|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule C2: Sch: 1/1 Rpt: 8/10 | |
| 2 FILER NAME South Texas Associated Builders & Contractors, Inc. PAC | | 3 Filer ID (Ethics Commission Filers) 00016700 | |
| 4 Date 06/30/2023 | 5 Corporation / Labor Organization name Associated Builders & Contractors, Inc. South Texas | 7 Amount of contribution(\$) \$75.00 | 8 In-kind contribution description Report |
| | 6 Corporation / Labor Organization address; City; State; Zip Code San Antonio, TX 78232 | | |

LOANS

SCHEDULE E

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E: Sch: 1/1 Rpt: 9/10 |
| 2 FILER NAME South Texas Associated Builders & Contractors, Inc. PAC | | 3 Filer ID (Ethics Commission Filers) 00016700 |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ 0.00 |
| 5 Date of loan | 7 Name of lender <input type="checkbox"/> 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 <input type="checkbox"/> None | | 15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/> |
| 16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable | 17 Name of guarantor | 19 Amount Guaranteed (\$) |
| | 18 Guarantor address; City; State; Zip Code | |
| 20 Principal occupation | | 21 Employer (See Instructions) |

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)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 1/1 Rpt: 10/10 | 2 FILER NAME South Texas Associated Builders & Contractors, Inc. PAC | 3 Filer ID (Ethics Commission Filers) 00016700 |
| 4 Date 01/01/2023 | 5 Payee name Lone Star Capital Bank | |
| 6 Amount (\$) \$4.81 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 150 N Loop 1604 E San Antonio, TX 78232 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Bank Fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | |
| Date 02/01/2023 | Candidate/Officeholder name Lone Star Capital Bank | |
| Amount (\$) \$2.13 <input type="checkbox"/> Expenditure from corporate funds | Office sought 150 N Loop 1604 E San Antonio, TX 78232 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Bank Fee |
| Office held | | |
| Complete ONLY if direct expenditure to benefit C/OH | | |
| Date 03/01/2023 | Candidate/Officeholder name Lone Star Capital Bank | |
| Amount (\$) \$2.27 <input type="checkbox"/> Expenditure from corporate funds | Office sought 150 N Loop 1604 E San Antonio, TX 78232 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Bank Fee |
| Office held | | |
| Complete ONLY if direct expenditure to benefit C/OH | | |