

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) 00066520	2 Total pages filed: 15
3 COMMITTEE NAME Focused Advocacy Political Action Committee (PAC)		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/16/2024 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3267 Bee Caves Road ste 107-72 Austin, TX 78746		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Snapper NICKNAME LAST SUFFIX Carr		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3267 Bee Caves Road ste 107-72 Austin, TX 78746		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 816 Congress Ave., Ste. 370 Austin, TX 78701		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 637-6020		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year 07/01/2023 THROUGH Month Day Year 12/31/2023		
11 ELECTION	ELECTION DATE Month Day Year ELECTION TYPE <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 Focused Advocacy Political Action Committee (PAC)	13 Filer ID (Ethics Commission Filers) 00066520
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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 See Schedule F
		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)	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 47,500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 39,544.15
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 14,063.81
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. Snapper Carr

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 Focused Advocacy Political Action Committee (PAC)		18 Filer ID (Ethics Commission Filers) 00066520
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 47,500.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
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 type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 39,544.15
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
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: 4/15
2 FILER NAME Focused Advocacy Political Action Committee (PAC)		3 Filer ID (Ethics Commission Filers) 00066520
4 Date 09/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOCUSED ADVOCACY, LLC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$5,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOCUSED ADVOCACY, LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$4,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOCUSED ADVOCACY, LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOCUSED ADVOCACY, LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOCUSED ADVOCACY, LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$11,000.00
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: 5/15
2 FILER NAME Focused Advocacy Political Action Committee (PAC)		3 Filer ID (Ethics Commission Filers) 00066520
4 Date 12/06/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOCUSED ADVOCACY, LLC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78746	7 Amount of Contribution (\$) \$4,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FOCUSED ADVOCACY, LLC <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$3,500.00
Principal occupation / Job title (See Instructions)		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: 1/10 Rpt: 6/15	2 FILER NAME Focused Advocacy Political Action Committee (PAC)	3 Filer ID (Ethics Commission Filers) 00066520
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4 Date 12/06/2023	5 Payee name BRYAN HUGHES CAMPAIGN
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 450 MINEOLA, TX 75773
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2023	Payee name CHRIS TURNER CAMPAIGN
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Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 182093 ARLINGTON, TX 76096
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/13/2023	Payee name Carol Alvarado Campaign
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 909 Texas Suite 716 Houston, TX 77002
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 2/10 Rpt: 7/15	2 FILER NAME Focused Advocacy Political Action Committee (PAC)	3 Filer ID (Ethics Commission Filers) 00066520
4 Date 09/13/2023	5 Payee name Cecil Bell Jr. for State Rep	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 18230 FM 1488 Ste. 302 Magnolia, TX 77354	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution-HD 3
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/23/2023	Payee name Dewayne Burns for State Representative	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 703 Stonelake Drive Cleburne, TX 76033	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution-HD 58
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2023	Payee name GARY VANDEAVER CAMPAIGN	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1101 HWY 98 NEW BOSTON, TX 75570	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution-HD 28
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 3/10 Rpt: 8/15	2 FILER NAME Focused Advocacy Political Action Committee (PAC)	3 Filer ID (Ethics Commission Filers) 00066520
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4 Date 11/09/2023	5 Payee name Gina Hinojosa Campaign
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code Room E2.316 P.O. Box 2910 Austin, TX 78768
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/06/2023	Payee name Greg Bonnen Campaign
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Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1183 Friendswood, TX 77549
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/13/2023	Payee name HAROLD DUTTON CAMPAIGN
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 401 JEWETT HOUSTON, TX 77026
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution-HD 142
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 4/10 Rpt: 9/15	2 FILER NAME Focused Advocacy Political Action Committee (PAC)	3 Filer ID (Ethics Commission Filers) 00066520
4 Date 10/04/2023	5 Payee name HORIZON BANK	
6 Amount (\$) \$224.15 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 600 CONGRESS AVE AUSTIN, TX 78701	
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 Check Order
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2023	Payee name HORIZON BANK	
Amount (\$) \$70.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 600 CONGRESS AVE AUSTIN, TX 78701	
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 Bank Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/25/2023	Payee name Hugh Shine Campaign	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 793 Temple, TX 76503	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 5/10 Rpt: 10/15	2 FILER NAME Focused Advocacy Political Action Committee (PAC)	3 Filer ID (Ethics Commission Filers) 00066520
4 Date 12/05/2023	5 Payee name JUAN CHUY HINOJOSA CAMPAIGN	
6 Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. BOX 1421 AUSTIN, TX 78767	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/06/2023	Payee name John Kuempel Campaign	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 902 E. College St. Seguin, TX 78155	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/11/2023	Payee name Justin Holland Campaign	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 2910 Austin, TX 78768-2910	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 6/10 Rpt: 11/15	2 FILER NAME Focused Advocacy Political Action Committee (PAC)	3 Filer ID (Ethics Commission Filers) 00066520
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4 Date 09/14/2023	5 Payee name KYLE KACAL CAMPAIGN
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6 Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 2910 Austin, TX 78768
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution-HD 12
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/05/2023	Payee name Keith Bell for Texas
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 1178 Forney, TX 75126
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/06/2023	Payee name Ken King Campaign
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Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P. O. Box 507 Canadian, TX 79014
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution-HD 88
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 7/10 Rpt: 12/15	2 FILER NAME Focused Advocacy Political Action Committee (PAC)	3 Filer ID (Ethics Commission Filers) 00066520
4 Date 10/10/2023	5 Payee name MARY ANN PEREZ CAMPAIGN	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO BOX 262432 HOUSTON, TX 77207-2432	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2023	Payee name RYAN GUILLEN CAMPAIGN	
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2504 SABLE PALM DR RIO GRANDE CITY, TX 78582-6454	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/13/2023	Payee name SENFROBIA THOMPSON CAMPAIGN	
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 10527 HOMSTEAD ROAD HOUSTON, TX 77016	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution-HD 141
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 8/10 Rpt: 13/15	2 FILER NAME Focused Advocacy Political Action Committee (PAC)	3 Filer ID (Ethics Commission Filers) 00066520
4 Date 12/05/2023	5 Payee name Steve Allison Campaign	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 200 Morning Side Dr San Antonio, TX 78209	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2023	Payee name TODD HUNTER CAMPAIGN	
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 445 CAPE HENRY CORPUS CHRISTI, TX 78412	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/12/2023	Payee name TRAVIS CLARDY FOR TEXAS	
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 209 E. MAIN ST NACOGDOCHES, TX 75961	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution-HD 11
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 9/10 Rpt: 14/15	2 FILER NAME Focused Advocacy Political Action Committee (PAC)	3 Filer ID (Ethics Commission Filers) 00066520
4 Date 12/13/2023	5 Payee name TRAVIS CLARDY FOR TEXAS	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 209 E. MAIN ST NACOGDOCHES, TX 75961	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/29/2023	Payee name TRENT ASHBY CAMPAIGN	
Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2915 Atkinson Dr Lufkin, TX 75901	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution- HD 57
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/13/2023	Payee name TREY MARTINEZ FISCHER CAMPAIGN	
Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 307 SOUTH SANA ROSA SAN ANTONIO, TX 78201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/10 Rpt: 15/15	2 FILER NAME Focused Advocacy Political Action Committee (PAC)	3 Filer ID (Ethics Commission Filers) 00066520
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4 Date 10/10/2023	5 Payee name Texas Legislative Study Group
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6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 12943 Austin, TX 78711
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/05/2023	Payee name YVONNE DAVIS CAMPAIGN
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Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO BOX 763368 DALLAS, TX 75376-3368
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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