

# MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM MPAC COVER SHEET PG 1

|   |   |   |  |   |
|---|---|---|--|---|
| <b>The MPAC Instruction Guide explains how to complete this form.</b>                         |   | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00084981 | <b>2</b> Total pages filed:<br>5                           |   |
| <b>3</b> COMMITTEE NAME<br>Texas Pro Business Coalition                                       |   |   | <b>OFFICE USE ONLY</b>                                     |   |
|   |   |   | Date Received<br><b>ELECTRONICALLY FILED</b><br>01/31/2024 |   |
| <b>4</b> COMMITTEE ADDRESS<br><br><input type="checkbox"/> Change of Address                  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP<br>PO Box 953<br><br>Colleyville, TX 76034  |   | Date Hand-delivered or Date Postmarked                     |   |
| <b>5</b> CAMPAIGN TREASURER NAME  | MS / MRS / MR   | FIRST<br>Frederick C.                                       | MI   | Receipt #   |
|   | NICKNAME<br><br>Tate  |   | LAST<br>Tate   | SUFFIX<br><br>Amount<br><br>Date Processed<br><br>Date Imaged |
| <b>6</b> CAMPAIGN TREASURER STREET ADDRESS<br>(Residence or Business)                         | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>959 W Glade Rd<br><br>Hurst, TX 76054  |   |  |   |
| <b>7</b> CAMPAIGN TREASURER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>PO Box 953<br><br>Colleyville, TX 76034   |   |  |   |
| <b>8</b> CAMPAIGN TREASURER PHONE   | AREA CODE   | PHONE NUMBER  | EXTENSION  |   |
|   |   | (469) 290-7500  |  |   |
| <b>9</b> REPORT TYPE  | <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR) |   |  |   |
| <b>10</b> MONTHLY REPORT FILING DEADLINE  | <input type="checkbox"/> January 5  |   | <input type="checkbox"/> April 5                           |   |
|   | <input checked="" type="checkbox"/> February 5  |   | <input type="checkbox"/> May 5                             |   |
|   | <input type="checkbox"/> March 5  |   | <input type="checkbox"/> June 5                            |   |
| <b>11</b> PERIOD COVERED  | Month   | Day   | Year   | THROUGH   |
|   |   |   |  | Month    Day    Year  |
|   | 12/26/2023  |   |  | 01/25/2024  |

**GO TO PAGE 2**

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

|  |   |
|--|---|
| <b>12 COMMITTEE NAME</b><br>Texas Pro Business Coalition | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00084981 |
|--|---|

|   |  |              |
|---|--|--------------|
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported |
|   |  | B. Opposed   |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported |
|   |  | B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |              |

|                                |   |              |
|--------------------------------|---|--------------|
| <b>15 CONTRIBUTION TOTALS</b>  | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b><br><input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00      |
|                                | <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ 10,000.00 |
| <b>EXPENDITURE TOTALS</b>      | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>   | \$ 0.00      |
|                                | <b>4. TOTAL POLITICAL EXPENDITURES</b>  | \$ 605.73    |
| <b>CONTRIBUTION BALANCE</b>    | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>   | \$ 13,349.06 |
| <b>OUTSTANDING LOAN TOTALS</b> | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>  | \$ 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.

Frederick C. Tate  
\_\_\_\_\_  
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 - MPAC

|  |   |   |
|--|---|---|
| <b>17 COMMITTEE NAME</b><br>Texas Pro Business Coalition |   | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00084981 |
| <b>19 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE         |   | SUBTOTAL AMOUNT   |
| 1.   | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                 | \$ 10,000.00  |
| 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              | \$ 605.73   |
| 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**

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>          |  | <b>1</b> Total pages Schedule A1:<br>Sch: 1/1 Rpt: 4/5              |
| <b>2</b> FILER NAME<br>Texas Pro Business Coalition                       |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084981            |
| <b>4</b> Date<br>01/22/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Signorelli, Danny<br><b>6</b> Contributor address; City; State; Zip Code<br><br>The Woodlands, TX 77380 | <b>7</b> Amount of Contribution (\$)<br><br>\$10,000.00             |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>President |  | <b>9</b> Employer (See Instructions)<br>The Signorelli Company, Inc |

# 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.

|  |   |  |
|--|---|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/1 Rpt: 5/5 | <b>2</b> FILER NAME<br>Texas Pro Business Coalition | <b>3</b> Filer ID (Ethics Commission Filers)<br>00084981 |
|--|---|--|

|                             |   |
|-----------------------------|---|
| <b>4</b> Date<br>01/15/2024 | <b>5</b> Payee name<br>CFO Shield, LLC dba Red Elephant Reports |
|-----------------------------|---|

|   |  |
|---|--|
| <b>6</b> Amount (\$)<br>\$551.96<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 953<br><br>Colleyville, TX 76034 |
|---|--|

|                                 |   |   |
|---------------------------------|---|---|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Bookkeeping Services & Support |
|---------------------------------|---|---|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                                   |
|--------------------|-----------------------------------|
| Date<br>01/17/2024 | Payee name<br>Plains Capital Bank |
|--------------------|-----------------------------------|

|   |  |
|---|--|
| Amount (\$)<br>\$53.77<br><br><input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code<br>325 Saint Paul Street, Suite 800<br><br>Dallas, TX 75201 |
|---|--|

|                               |   |  |
|-------------------------------|---|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Monthly Service Charge |
|-------------------------------|---|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

|  |  |
|--|--|
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