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) 00042938 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Construction Assn. PAC Date Received **ELECTRONICALLY FILED** 02/02/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1011 San Jacinto Blvd., Ste. 330 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78701-2494 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Brian NAME NICKNAME LAST **SUFFIX** Chester STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 11540 Plano Rd. STREET **ADDRESS** (Residence or Business) Dallas, TX 75243 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1011 San Jacinto Blvd., Ste. 330 MAILING **ADDRESS** Austin, TX 78701-2494 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 473-3773 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) X **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2024 01/25/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 General Special

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME		1	L3 Filer ID	(Ethics Commission Filers)
Texas Construction A	Assn. PAC		00042938	
4 COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Массило	A. Supported		
	Measures (Describe by date and location	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	3. Officeholders	The Honorable Steve Allison S	tata Panrasi	entative
	Assisted (Identify by name or, if applicable, classify by party.)	The Honorable Steve Allison S	tate repress	cmanve
.5 CONTRIBUTION	1. TOTAL UNITEMIZE	D POLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICA	qualifies for the higher itemization threshold		
		EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	3,169.13
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	69,547.90
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST D G PERIOD	DAY \$	111,496.00
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TI REPORTING PERIOD	HE \$	0.00
6 AFFIDAVIT				
		I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code.		
		Mr. Brian		
		Signature of Can	npaign Treasu	ırer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ped before me, by the said	, thi	is the	day
		which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of office	cer administering oath

FORM GPAC **ADDENDUM**

12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Construction Assn. PAC					00042938	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)				
	(Attach lists on plain paper to complete this report if necessary.)		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.)		The Honorable Trent Ashby Star	te Representat	ive
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
	(Attach lists on plain paper to complete this report if necessary.)		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.)		The Honorable Keith Bell State	Representative	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
	(Attach lists on plain paper to complete this report if necessary.)		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.)		The Honorable Ben Bumgarner	State Represe	ntative

FORM GPAC ADDENDUM

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					1 ago 1 01 20
12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	Texas Construction Ass	n. PAC			00042938
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
	(Attach lists on plain paper to complete this	applicable, classify by party.)	B. Opposed		
	report if necessary.)				
		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.)		The Honorable Dewayne Burns	State Representative
	COMMITTEE	1. Candidates	A. Supported		
	ACTIVITY		A. Supported		
		(Identify by name or, if applicable, classify by party.)			
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
			B. Opposed		
		Officeholders Assisted (Identify by name or, if		The Honorable Angie Button Sta	ate Representative
		applicable, classify by party.)			
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures	A. Supported		
		(Describe by date and location of election and nature of issue.)	74. Supported		
			B. Opposed		
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		The Honorable Giovanni Caprigl	ione State Representative
		[,, 5, party.)	<u> </u>		

FORM GPAC ADDENDUM

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					1 ago o o 120
12 C	OMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Т	exas Construction Ass	n. PAC			00042938
	COMMITTEE CTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
p	Attach lists on plain aper to complete this eport if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
			B. Opposed		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)		The Honorable Mano DeAyala S	State Representative
C	OMMITTEE	1. Candidates	A. Supported		
Α	CTIVITY	(Identify by name or, if applicable, classify by party.)			
p	Attach lists on plain aper to complete this eport if necessary.)		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.)		The Honorable Frederick Frazier	State Representative
	COMMITTEE CTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
p	Attach lists on plain aper to complete this eport if necessary.)		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.)		The Honorable Stan Gerdes Sta	ate Representative

FORM GPAC ADDENDUM

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					1 ago 0 01 20
12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	Texas Construction Ass	n. PAC			00042938
14	COMMITTEE	1. Candidates	A. Supported		<u> </u>
	ACTIVITY	(Identify by name or, if applicable, classify by party.)			
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures	A. Supported		
		(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.)		The Honorable Cole Hefner Star	te Representative
	COMMITTEE	<u> </u>			
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if	A. Supported		
		applicable, classify by party.)			
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and	A. Supported		
		nature of issue.)	B. Opposed		
		Officeholders Assisted		The Honorable Justin Holland S	tate Representative
		(Identify by name or, if applicable, classify by party.)			
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures	A. Supported		
		(Describe by date and location of election and nature of issue.)			
			B. Opposed		
		3. Officeholders Assisted		The Honorable Lacey Hull State	Representative
		(Identify by name or, if applicable, classify by party.)			

FORM GPAC ADDENDUM

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				1 ago 1 01 20
12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Texas Construction Ass	sn. PAC			00042938
14 COMMITTEE	1. Candidates	A. Supported		<u> </u>
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(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.)		The Honorable Jacey Jetton Sta	ate Representative
COMMITTEE	Candidates	A. Supported		
ACTIVITY	(Identify by name or, if	A. Supported		
	applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	3. Officeholders Assisted		The Honorable Stan Kitzman St	ate Representative
	(Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if		The Honorable Stephanie Klick	State Representative
	applicable, classify by party.)			

FORM GPAC ADDENDUM

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					1 ago o o 120
12 C	OMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Te	exas Construction Ass	n. PAC			00042938
	DMMITTEE CTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
pa	ttach lists on plain uper to complete this port if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
			B. Opposed		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)		The Honorable Jeff Leach State	Representative
	OMMITTEE	1. Candidates	A Supported		
	CTIVITY		A. Supported		
Α.	5114111	(Identify by name or, if applicable, classify by party.)			
pa	ttach lists on plain uper to complete this port if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
			B. Opposed		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)		The Honorable Morgan Meyer S	State Representative
	OMMITTEE CTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
pa	ttach lists on plain uper to complete this port if necessary.)		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.)		The Honorable Glenn Rogers S	tate Representative

FORM GPAC ADDENDUM

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				1 age 0 0. 20
12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Texas Construction Assn. F	PAC			00042938
14 COMMITTEE 1.	Candidates	A. Supported		
ACTIVITY (Ide	ntify by name or, if licable, classify by party.)	7 ii Gupportou		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
2.	Measures	A. Supported		
(De:	scribe by date and ation of election and ure of issue.)			
		B. Opposed		
(Ide	Officeholders Assisted ntify by name or, if licable, classify by party.)		The Honorable Matt Shaheen Si	tate Representative
		A Cupported		
A OTIV (IT) (ntify by name or, if	A. Supported		
appl	licable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures scribe by date and	A. Supported		
loca	ution of election and ure of issue.)			
		B. Opposed		
I	Officeholders Assisted		The Honorable Hugh Shine Stat	e Representative
	ntify by name or, if licable, classify by party.)			
ACTIVITY (Ide	Candidates ntify by name or, if licable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
2.	Measures	A. Supported		
loca	scribe by date and tion of election and ure of issue.)			
		B. Opposed		
	Officeholders Assisted ntify by name or, if		The Honorable David Spiller Sta	ite Representative
	ntify by name or, if licable, classify by party.)			

FORM GPAC ADDENDUM

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					1 ago 10 01 20
12 C	OMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Т	exas Construction Ass	n. PAC			00042938
	OMMITTEE CTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
pa	Attach lists on plain aper to complete this port if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
			B. Opposed		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)		The Honorable Lynn Stucky Sta	te Representative
C	OMMITTEE	1. Candidates	A. Supported		
	CTIVITY	(Identify by name or, if applicable, classify by party.)			
pa	Attach lists on plain aper to complete this eport if necessary.)		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.)		The Honorable Kronda Thimescl	1 State Representative
	OMMITTEE CTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
pa	Attach lists on plain aper to complete this eport if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
			B. Opposed		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)		The Honorable Ellen Troxclair S	tate Representative

FORM GPAC **ADDENDUM**

			1	
				(Ethics Commission Filers)
sn. PAC			00042938	
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			
Officeholders Assisted (Identify by name or, if applicable, classify by party.)		The Honorable Gary VanDeaver	State Represer	ntative
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			
Officeholders Assisted (Identify by name or, if		The Honorable Nathan Johnson	State Senator	
	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 A. Supported 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 The Honorable Gary VanDeaver A. Supported Describe by date and location of election and nature of issue.) B. Opposed A. Supported Describe by date and location of election and nature of issue.) B. Opposed The Honorable Nathan Johnson The Honorable Nathan Johnson	A. Supported

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

					12 of 25
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethics	s Commission Filers)
		nstruction Assn. PAC	00042938	`	
19 SC	HEDULE	E SUBTOTALS	ı	Π	
	ME OF		s	SUBTOTAL AMOUNT	
		├──			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	2,865.00
				 	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
				<u> </u>	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
				<u> </u>	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	R	\$	
		ORGANIZATION		Ψ	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	TION OR		
5.	Ш	LABOR ORGANIZATION		\$	
		The second of th		<u> </u>	
6.	Ш	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$	
		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR		\vdash	
7.	X	ORGANIZATION		\$	304.13
				┼──	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O	ORGANIZATION	\$	
				├──	
9.		SCHEDULE E: LOANS		\$	
				├ ──	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	69,547.90
				ļ	
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
	<u> </u>	00/12/02/12/13/14/02/11/22/02/11/04/11		Ψ	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONIC		
14.	Ш	SCHEDULE FO. FUNCHAGE OF HAVES INILIATED FROM FOLITICAL CONTRIBUTION	JNG	\$	
10		CONTROL OF THE PROPERTY OF THE		<u> </u>	
13.	Ш	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
				\vdash	
14.	Ш	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
		COURTS IN THE PECT OFFICE CAING PERLINDS AND CONTRIBUTIONS I		┼──	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	
				<u> </u>	

	MONET	ARY POLITICAL C	CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	1	Total pages Schedule A1: Sch: 1/2 Rpt: 13/25			
2	FILER NAME Texas Const	ruction Assn. PAC			3	Filer ID (Ethics Commission 00042938	on Filers)
4	Date 01/12/2024	5 Full name of contributor				Amount of Contribution (\$)	\$5.00
_		Austin, TX 78748		Employer (See Instructions	Ĺ		
8	VP of Admin	pation / Job title (See Instructions istration		ation			
	Date 01/17/2024	Full name of contributor Glaze, John (Mr.) Contributor address; City; St Klein, TX 77379				Amount of Contribution (\$)	\$1,000.00
	Principal occu Contractor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 01/17/2024	Full name of contributor Guinn, Nikki (Ms.) Contributor address; City; St Pflugerville, TX 78660		Amount of Contribution (\$)	\$60.00		
	Principal occu Contractor	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 01/10/2024	Full name of contributor Jones, Raymond (Mr.) Contributor address; City; St Houston, TX 77008				Amount of Contribution (\$)	\$500.00
	Principal occu Contractor	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 01/11/2024	Full name of contributor Jones, Stephen (Mr.) Contributor address; City; St Houston, TX 77039	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu Contractor	pation / Job title (See Instructions)	Employer (See Instructions	s)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/2 Rpt: 14/25	
2	FILER NAME Texas Construction Assn. PAC		3	Filer ID (Ethics Commission 00042938	n Filers)	
4	Date 01/17/2024	5 Full name of contributor out-of-state PAC (ID#:) Kollar, Jim (Mr.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00
_		Hutto, TX 78634				
8	Contractor	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 01/17/2024	Full name of contributor out-of-state PAC (ID#:_Lambert, Chris (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Cedar Park, TX 78613 pation / Job title (See Instructions)	Employer (See Instructions	\		
	Contractor	pation / Job title (See Instructions)	L&O Electric)		
	Date 01/17/2024	Full name of contributor out-of-state PAC (ID#:_ Sunvison, Suzanne (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Round Rock, TX 78664				
	Principal occu Contractor	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/17/2024	Full name of contributor out-of-state PAC (ID#:_Young, Shawn (Ms.) Contributor address; City; State; Zip Code Hutto, TX 78634			Amount of Contribution (\$)	\$50.00
	Principal occu Contractor	pation / Job title (See Instructions)	Employer (See Instructions)		

NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C4

_						
	The Instruction Guide explains how to complete this form.				Schedule C4: ot: 15/25	
2	Z FILER NAME Texas Construction Assn. PAC		3	Filer ID 00042938	(Ethics Commission Filers)	
4	Date	5 Corporation / Labor Organization name	6	Amount (\$)		
L	01/01/2024	Texas Construction Association				54.13
Г	Date	Corporation / Labor Organization name		Amount (\$)		
	01/25/2024	Texas Construction Association			:	250.00

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By - GittAwards/Memorials Expense Printing Expense I ravel Out or District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed							
Credit Card Payment The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
Sch: 1/10 Rpt: 16/25	Texas Construction Assn. PAC 00042938						
4 Date 5 Payee name							
01/20/2024	Allison, Steve (Rep.)						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$2,500.00	14546 Brook Hollow Blvd.						
	Box 511						
Expenditure from corporate funds	San Antonio, TX 78232						
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						
	Campaign contribution						
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
01/20/2024	Ashby, Trent (Rep.)						
Amount (\$)	Payee address; City; State; Zip Code						
\$2,500.00	P.O. Box 412						
Expenditure from							
corporate funds	Lufkin, TX 75902						
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. Check if Austin TX officeholder living overnoon.						
	Candidate/Officeholder/Political Committee Campaign contribution						
	Sampagn sommanism						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OI							
Date	Payee name						
01/20/2024	Bell, Keith (Rep.)						
Amount (\$)	Payee address; City; State; Zip Code						
\$2,500.00	P.O. Box 1178						
42,000.00	116), BOX 1176						
Expenditure from corporate funds	Forney, TX 75126						
•							
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.						
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense						
	Campaign contribution						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI							
experiulture to beliefit C/OI	1						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/10 Rpt: 17/25	Texas Construction Assn. PAC 00042938
4 Date	5 Payee name
01/20/2024	Bumgarner, Ben (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	5150 Kensington Ct.
Ψ1,000.00	5256 Kensington Gt.
Expenditure from	Flower Mound, TV 75022
corporate funds	Flower Mound, TX 75022
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
01/20/2024	Burns, Dewayne (Rep.)
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 703 Stonelake Dr.
\$2,500.00	103 Stoffetare DI.
Expenditure from	OL L TV 70000
corporate funds	Cleburne, TX 76033
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
01/20/2024	Button, Angie (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	P.O. Box 832748
+= ,000.00	
Expenditure from corporate funds	Richardson, TX 75083
·	I
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made Ry Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 3/10 Rpt: 18/25	Texas Construction Assn. PAC 00042938					
4 Date	5 Payee name					
01/20/2024	Capriglione, Giovanni (Rep.)					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$2,500.00	P.O. Box 92007					
Expenditure from corporate funds	Southlake, TX 76092					
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					
	Campaign contribution					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/Ol						
Date	Payee name					
01/20/2024	DeAyala, Mano (The Honorable)					
Amount (\$)	Payee address; City; State; Zip Code					
\$2,500.00	12335 Kingsride Lane					
	Suite 416					
Expenditure from corporate funds	Houston, TX 77024					
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					
	Campaign contribution					
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OI						
Date	Payee name					
01/20/2024	Frazier, Frederick (The Honorable)					
Amount (\$)	Payee address; City; State; Zip Code					
\$2,500.00	4100 Eldorado Pkwy.					
	Suite 100					
Expenditure from corporate funds	McKinney, TX 75070					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Contributions/Donations Made By					
	Candidate/Officeholder/Political Committee					
	Campaign contribution					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OI						

SCHEDULE F1

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1 Total pages Schedule F1:	,				
Sch: 4/10 Rpt: 19/25	Texas Construction Assn. PAC 00042938				
4 Date	5 Payee name				
01/20/2024	Gerdes, Stan (The Honorable)				
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code P.O. Box 1060				
Ψ2,300.00	1.O. Box 1000				
Expenditure from corporate funds	Smithville, TX 78957				
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 Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	Candidate/Officeholder/Political Committee				
	Campaign commodern				
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
01/20/2024	Hefner, Cole (The Honorable)				
Amount (\$)	Payee address; City; State; Zip Code				
\$2,500.00	P.O. Box 167				
Expenditure from corporate funds	Mount Pleasant, TX 75456				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Contributions/Donations Made By Condidate /Officeholder/Political Committee				
	Candidate/Officeholder/Political Committee				
	Campaign commodern				
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
01/20/2024	Holland, Justin (Rep.)				
Amount (\$)	Payee address; City; State; Zip Code				
\$2,500.00	3021 Ridge Rd.				
	Suite A Box 79				
Expenditure from corporate funds	Rockwall, TX 75032				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Contributions/Donations Made By Contributions/Donations Made By Contributions/Contributions/Donations Made By Contributions/C				
	Candidate/Officeholder/Political Committee				
	Sampaigh sommand				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
expenditure to benefit C/O	1				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 5/10 Rpt: 20/25	Texas Construction Assn. PAC 00042938			
4 Date	5 Payee name			
01/20/2024	Hull, Lacey (The Honorable)			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$2,500.00	P.O. Box 19231			
Expenditure from				
corporate funds	Houston, TX 77224			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder (Political Committee) Check if Austin, TX, officeholder living expense			
	Campaign contribution			
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
01/20/2024	Jetton, Jacey (The Honorable)			
Amount (\$)	Payee address; City; State; Zip Code			
\$2,500.00	77 Sugar Creek Blvd.			
	Suite 600			
Expenditure from corporate funds	Sugar Land, TX 77478			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	Campaign contribution			
	Campaign continuation			
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
01/20/2024	Johnson, Nathan (Sen.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$5,000.00	P.O. Box 670994			
Expenditure from corporate funds	Dallas, TX 75367-0994			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	Campaign contribution			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OH				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/10 Rpt: 21/25	Texas Construction Assn. PAC 00042938
4 Date	5 Payee name
01/20/2024	Kitzman, Stan (The Honorable)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	P.O. Box 553
Expenditure from	Dettices TV 774CC
corporate funds	Pattison, TX 77466
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign contribution
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/20/2024	Klick, Stephanie (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	P.O. Box 7592
ΨΖ,300.00	P.O. Box 7592
Expenditure from corporate funds	Fort Worth, TX 76111
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.
	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
01/20/2024	Leach, Jeff (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	P.O. Box 866186
Expenditure from	
corporate funds	Plano, TX 75086
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LAFENDITONE	Candidate/Officeholder/Political Committee
	Campaign contribution
2111111111	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Orportantal C C Solicin L. L.	'

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
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	,
1 Total pages Schedule F1: Sch: 7/10 Rpt: 22/25	2 FILER NAME3 Filer ID(Ethics Commission Filers)Texas Construction Assn. PAC00042938
4 Date	5 Payee name
01/20/2024	Meyer, Morgan (The Honorable)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	3838 Oak Lawn Ave.
Expenditure from	Suite 400
corporate funds	Dallas, TX 75219
8 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
	Campaign contribution
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/01/2024	PNC Bank
Amount (\$)	Payee address; City; State; Zip Code
\$47.90	P.O. Box 609
Expenditure from	Ditteburgh DA 15220
corporate funds	Pittsburgh, PA 15230
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Tayon Complete Schedule T
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Service charge
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/20/2024	Rogers, Glenn (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	P.O. Box 11
Ψ2,300.00	1.0. BOX 11
Expenditure from corporate funds	Graford, TX 76449
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign continuution
Complete CNII V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ing Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1 Total pages Schedule F1:	,					
Sch: 8/10 Rpt: 23/25	Texas Construction Assn. PAC 00042938					
4 Date	5 Payee name					
01/20/2024	Shaheen, Matt (The Honorable)					
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 3917 Malton Dr.					
Expenditure from corporate funds	Plano, TX 75025					
8 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. Check if travel outside of Texas. Complete Schedule T.					
	Candidate/Officeholder/Political Committee					
	Campaign continuation					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/Ol	1					
Date	Payee name					
01/20/2024	Shine, Hugh (Rep.)					
Amount (\$)	Payee address; City; State; Zip Code					
\$2,500.00	P.O. Box 793					
Expenditure from corporate funds	Temple, TX 76503					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Contributions/Donations Made By					
	Candidate/Officeholder/Political Committee					
	Campaign contribution					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O	1					
Date	Payee name					
01/20/2024	Spiller, David (The Honorable)					
Amount (\$)	Payee address; City; State; Zip Code					
\$2,500.00	P.O. Box 447					
Expenditure from	Jacksboro, TX 76458					
corporate funds						
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					
	Campaign contribution					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O	1					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 9/10 Rpt: 24/25	Texas Construction Assn. PAC 00042938					
4 Date	5 Payee name					
01/20/2024	Stucky, Lynn (Rep.)					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$1,500.00	P.O. Box 464					
— Consenditure from						
Expenditure from corporate funds	Denton, TX 76202					
8 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. Check if travel outside of Texas. Complete Schedule T.					
Candidate/Officeholder/Political Committee Campaign contribution						
	Campaign continuation					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O	H					
Date	Payee name					
01/20/2024	Thimesch, Kronda (Rep.)					
Amount (\$)	Payee address; City; State; Zip Code					
\$1,500.00	1301 Justin Rd.					
	Suite 201-310					
Expenditure from corporate funds	Lewisville, TX 75077					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee					
	Campaign contribution					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OI	H					
Date	Payee name					
01/20/2024	Troxclair, Ellen (The Honorable)					
Amount (\$)	Payee address; City; State; Zip Code					
\$2,500.00	701 Hwy. 281					
— Consenditure from	Suite H #196					
Expenditure from corporate funds	Marble Falls, TX 78654					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Contributions/Donations Made By					
	Candidate/Officeholder/Political Committee					
	Campaign contribution					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/O						

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Service	temorials Expense s Printing Salaries. Ction Guide explains how to c	Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID (Ethics Commission Filers)
Sch: 10/10 Rpt: 25/25	Texas Construction A	ASSN. PAC		00042938
4 Date	5 Payee name			
01/20/2024	VanDeaver, Gary (Th	ie Honorable)		
6 Amount (\$)	7 Payee address; Cit	y; State; Zip C	ode	
\$2,500.00	P.O. Box 866			
Expenditure from				
corporate funds	New Boston, TX 755		1	
8 PURPOSE OF	(a) Category (See Categories		(b) Description	
EXPENDITURE	Contributions/Donation		l <u>—</u>	de of Texas. Complete Schedule T. officeholder living expense
	Candidate/Officeriold	er/Political Committee	Campaign contr	
			Campaign conti	ibation
9 Complete ONLY if direct	Candidate/Officeholder n	ame Office so	<u> </u> uaht	Office held
expenditure to benefit C/O			-9	