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) 00085334						2 Total pages filed: 6		
3	3 COMMITTEE NAME					OFFICE USE ONLY		
	Texas Republican Initiative					Date Received		
						02/05/2024		
4	COMMITTEE ADDRESS		TY;	STATE; ZIP CODE				
	ADDIE33	9438 Pearsall Dr.				Date Hand-delivered or Date Postmarked		
	Change of Address							
	L °	Houston, TX 77064				Receipt # Amount		
						Date Processed		
						Date Imaged		
5	CAMPAIGN TREASURER	MS / MRS / MR FIRST			N	11		
	NAME	Mr. Mark T.						
		NICKNAME LAST			S	SUFFIX		
		McCaig						
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE)	;	APT / SUITE #; CITY	';	STATE; ZIP CODE		
	TREASURER	9438 Pearsall Dr.						
	STREET ADDRESS							
	(Residence or Business)	Houston, TX 77064						
-					-v.			
Ľ	CAMPAIGN TREASURER	STREET OR PO BOX;		APT / SUITE #; CIT	τ,	STATE; ZIP CODE		
	MAILING	9438 Pearsall Dr.						
	ADDRESS							
	Change of Address	Houston, TX 77064						
8	CAMPAIGN	AREA CODE PHONE NUMBER	F۷	TENSION				
ľ	TREASURER		L^					
PHONE (281) 222-0585								
9	REPORT			de la francista d	_			
ľ	TYPE	January 15	suth	day before election		Dissolution (Attach PAC-DR)		
			Bth d	ay before election		10th day after campaign treasurer		
		July 15	Runc	off	_	termination		
10	PERIOD	Month Day Year		Month Day		Year		
	COVERED	01/01/2024	ΉR	OUGH 01/25/20	24			
11	ELECTION	ELECTION DATE		ELECTION TYPE		—		
		Month Day Year X	Prin	nary Runoff		Other		
		03/05/2024	Gen	eral Special				
-		II						
	GO TO PAGE 2							
For	orms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.9000c47f							
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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME 13 Filer					(Ethics Commission Filers)		
Texas Republican Initiative 0008							
14 COMMITTEE ACTIVITY	Bonna toini oodiity taity onai			r			
(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. SupportedB. Opposed					
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS OR GUARANTEES OF LOANS, ADE ELECTRONICALLY) qualifies for the higher itemization the	ÔR	\$	0.00		
	2. TOTAL POLITICA (OTHER THAN PLE	_ CONTRIBUTIONS DGES, LOANS, OR GUARANTI	EES OF LOANS)	\$	10,000.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES		\$	0.00		
	4. TOTAL POLITICA	_ EXPENDITURES		\$	7,944.82		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	ONTRIBUTIONS MAINTAINED	AS OF THE LAST D	AY \$	2,331.52		
OUTSTANDING LOAN TOTALS		MOUNT OF ALL OUTSTANDIN PEPORTING PERIOD	NG LOANS AS OF TH	HE \$	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. Mark T. McCaig						
	Signature of Campaign Treasurer						
AFFIX NOTARY STAMP / SEAL ABOVE							
Sworn to and subscribed before me, by the said, this the				s the	day		
of, 20, to certify which, witness my hand and seal of office.							
Signature of officer ad	ninistering oath	Printed name of officer administ	ering oath	Title of office	er administering oath		
Forms provided by Texas E	thics Commission	www.ethics.state.tx.u	S		Version V3.5.1.9000c47f		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC

Page 3 of 6

						Fage 3 01 0
12 COMMITTEE NAME Texas Republican Initiat	tive				13 Filer ID 00085334	(Ethics Commission Filers)
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Lacey Hull	State Representati	ve	
(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.)					

S	UBT	OTALS - GPAC	C		FORM GPAC SHEET PG 3 4 of 6
		EE NAME publican Initiative	18 Filer ID 00085334	(Ethics	Commission Filers)
	HEDUL	SI	JBTOTAL AMOUNT		
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	10,000.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABC ORGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		\$			
7.	7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION				
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION				
9.		\$			
10	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	\$	7,944.82	
11		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$		
12		\$			
13	13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD				
14	14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				
15		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/6
2 FILER NAME Texas Republican Initiative	3 Filer ID (Ethics Commission Filers) 00085334
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 01/19/2024 Engage Odessa 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$10,000.00
Odessa, TX 79768	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instruction)	ns)

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees C Food/Beverage Expense P y - Gift/Awards/Memorials Expense P	oan Repayment/Reimbursement Office Overhead/Rental Expense Yolling Expense Printing Expense Balaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District 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: 1/1 Rpt: 6/6	Texas Republican Initiative		00085334			
4 Date	5 Payee name					
01/23/2024	AlphaGraphics Permian Basin					
6 Amount (\$) \$7,937.32	7 Payee address; City; State; 2 1333 E. 5th St.	Zip Code				
Expenditure from corporate funds	Odessa, TX 79761					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedu Printing Expense	Check if travel outs	ide of Texas. Complete Schedule T. , officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ce sought	Office held			
Date 01/19/2024	Payee name Prosperity Bank					
Amount (\$) \$7.50 Expenditure from corporate funds	Payee address; City; State; 2 9155 W. Sam Houston Parkway N. Houston, TX 77064	Zip Code				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedu Accounting/Banking	Check if travel outs	ide of Texas. Complete Schedule T. , officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OF		ce sought	Office held			