### 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)   00066465				2 Total pages filed: 4		
3	COMMITTEE NAME		•	OFFICE USE ONLY		
	HDCC Incumbent	Protection Fund		Date Received		
				ELECTRONICALLY FILED		
				02/26/2024		
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CIT	Y; STATE; ZIP CODE			
	ADDRESS	314 East Highland Mall Blvd		Date Hand-delivered or Date Postmarked		
	Change of Address	Suite 104		Date Hand-delivered of Date Fostinarice		
		Austin, TX 78752		Receipt # Amount		
				Date Processed		
				Date Imaged		
				Date integen		
5	CAMPAIGN	MS / MRS / MR FIRST		MI		
	TREASURER NAME	Regina				
		NICKNAME LAST		SUFFIX		
		Hinojosa				
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODE		
	TREASURER STREET	314 East Highland Mall Blvd. Ste. 104				
	ADDRESS					
	(Residence or Business)	Austin, TX 78752				
7		STREET OR PO BOX;	APT / SUITE #; CITY	; STATE; ZIP CODE		
	TREASURER MAILING	PO Box 300095				
	ADDRESS					
	Change of Address	Austin, TX 78703				
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION			
	TREASURER PHONE	(512) 478-9800				
9	REPORT					
ľ	TYPE	January 15	)th day before election	Dissolution (Attach PAC-DR)		
		X 8t	h day before election	10th day after campaign treasurer termination		
			unoff			
10	PERIOD	Month Day Year	Month Day	Year		
	COVERED	01/26/2024 TH	ROUGH 02/24/2024	4		
11	ELECTION	ELECTION DATE Month Day Year	Primary Runoff	Other		
		03/05/2024				
			Seneral Special			
⊢		I I				
	GO TO PAGE 2					
Foi	rms provided by Te	xas Ethics Commission www.et	hics.state.tx.us	Version V3.5.1.9000c47f		

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME 13 Filer				D (Ethics Commission Filers)		
HDCC Incumbent Protection Fund 0000			00066	6465		
14 COMMITTEE ACTIVITY	1. 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				
		A. Supported				
	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	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	<b>3</b> 0.00		
	2. TOTAL POLITICA	L CONTRIBUTIONS	\$	<b>0</b> .00		
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)		0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	38.38		
	4. TOTAL POLITICA	L EXPENDITURES	\$	2,489.25		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	<b>5</b> 16,179.62		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	<b>5</b> 0.00		
16 AFFIDAVIT	1					
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.						
	Regina Hinojosa					
Signature of Campaign Treasurer						
AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed before me, by the said 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						
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.9000c47f		

S	UBT	FORM GPAC OVER SHEET PG 3 3 of 4		
	MMITTI CC Inc	(Ethics Commission Filers)		
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			\$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 2,489.25
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Fees Of Food/Beverage Expense Po Gift/Awards/Memorials Expense Pri	an Repayment/Reimbursement fice Overhead/Rental Expense lling Expense nting Expense laries/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: 4/4	HDCC Incumbent Protection Fund		00066465
	5 Payee name		
02/20/2024	Goodman Campaigns		
6 Amount (\$)	<b>7</b> Payee address; City; State; Z	ip Code	
\$2,088.52	211 E 7th, St Ste 620		
Expenditure from corporate funds	Austin, TX 78701		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Consulting Expense	Check if travel outs	side of Texas. Complete Schedule T. X, officeholder living expense rVICES
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF		e sought	Office held
Date	Payee name		
02/08/2024	Switchboard		
Amount (\$)	Payee address; City; State; Z	ip Code	
\$362.35	PO Box 33485		
Expenditure from corporate funds	Washington, DC 20023		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule Solicitation/Fundraising Expense	Check if travel outs	side of Texas. Complete Schedule T. K, officeholder living expense S
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		e sought	Office held