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) 00018745 3 COMMITTEE NAME **OFFICE USE ONLY** Baptist Ministers' Association of Houston & Vicinity PAC Date Received **ELECTRONICALLY FILED** 02/26/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 7817 Calhoun Rd. Date Hand-delivered or Date Postmarked Change of Address Houston, TX 77033 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Dr. Max A. NAME NICKNAME LAST **SUFFIX** Miller Jr. STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 6934 Flamingo Dr. STREET **ADDRESS** (Residence or Business) Houston, TX 77087-6612 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 7817 Calhoun Rd. MAILING **ADDRESS** Houston, TX 77033 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 504-0063 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/26/2024 02/24/2024 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

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Baptist Ministers' Ass	sociation of Houston & Vi	cinity PAC	00018745	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. Kyle Carter District Judge		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
		AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	16,250.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	16,587.25
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Dr. Max A	A. Miller Jr.	
		Signature of Ca	mpaign Treasure	r
AFFIX NOTAI	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said	, t	his 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

FORM GPAC ADDENDUM

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TEE NAME Ministers' Assoc TEE Y sts on plain complete this necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ms. Thierry Shawn State Repre	13 Filer ID 00018745 sentative	(Ethics Commission Filers)
TEE Y sts on plain complete this	Candidates (Identify by name or, if	A. Supported	Ms. Thierry Shawn State Repre		
Y sts on plain complete this	(Identify by name or, if		Ms. Thierry Shawn State Repre	sentative	
complete this		D. One:			
		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.)				
TEE Y	1. Candidates (Identify by name or, if applicable, classify by party.)		Ms. Morris Brittanye District Jud	lge	
sts on plain complete this 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.)				
TEE Y	Candidates (Identify by name or, if applicable, classify by party.)		Ms. Kim Ogg District Attorney, H	Harris Co.	
sts on plain complete this necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Y sts on plain complete this	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) TEE Y 1. Candidates (Identify by name or, if applicable, classify by party.) sts on plain complete this necessary.) 2. Measures (Describe by date and location of election and nature of issue.)	Illustrian of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) TEE Y 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed	Ication of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) TEE Y 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed	location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) TEE Y 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed A. Supported Ms. Kim Ogg District Attorney, Harris Co. B. Opposed B. Opposed Complete this necessary.) 2. Measures (Describe by date and location of election and nature of issue.)

FORM GPAC ADDENDUM

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	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
ľ	Baptist Ministers' Assoc	iation of Houston & \	Vicinity PAC		00018745	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Ms. Rosalind Ceasar State Repr	resentative	
	(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.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Ms. Nicole Perdue District Judge	9	
	(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.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Ms. Vivian King District Judge		
	(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.)				

FORM GPAC **ADDENDUM**

						Page 5 01	14
12 COMMITTEE NAME				:	13 Filer ID	(Ethics Commission File	ers)
Baptist Ministers' Association	of Houston & \	icinity PAC			00018745		
ACTIVITY (Identif	andidates y by name or, if ble, classify by party.)	A. Supported	Ms. Danielle Bess Coun	nty Tax As	ssessor-Collec	ctor.	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
(Descri	easures be by date and n of election and	A. Supported					
	of issue.)	B. Opposed					
As	fficeholders ssisted						
	y by name or, if ble, classify by party.)						
ACTIVITY (Identif	andidates y by name or, if ble, classify by party.)	A. Supported	Ms. Sheila Jackson-Lee	U. S. Co	ngress - 18th	District.	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
(Descri location	easures be by date and n of election and of issue.)	A. Supported					
		B. Opposed					
A: (Identif	fficeholders ssisted y by name or, if						
	ble, classify by party.) andidates	A Cupported	Mr. James Bleilling Cons	-t-bl- D	-:		
ACTIVITY (Identif	y by name or, if ble, classify by party.)	A. Supported	Mr. James Phillips Cons	stable Pre	CITICL 7.		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
(Descri	easures be by date and n of election and of issue.)	A. Supported					
		B. Opposed					
As	fficeholders ssisted						
	y by name or, if ble, classify by party.)						

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COMMITTEE NAME				12 Files ID (Ethica Commission Files)
				13 Filer ID (Ethics Commission Filers)
Baptist Ministers' Assoc	iation of Houston & \	Vicinity PAC		00018745
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ms. Alma Allen State Represen	tative
(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.)			
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ms. Chavon Carr County Proba	te Judge Court No. 5.
(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 applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Ms. Cheryl Thornton District Jud	dge
(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.)			
	ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 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.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 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.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders (Identify by name or, if applicable, classify by party.) 3. Officeholders (Identify by name or, if applicable, classify by party.) 3. Officeholders (Identify by name or, if applicable, classify by party.)	ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 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.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (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.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed COMMITTEE (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) COMMITTEE (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted B. Opposed 3. Officeholders Assisted B. Opposed	ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and notifier of issue.) 3. Officeholders Assisted (identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (identify by name or, if applicable, classify by party.) (Attach lists on plain paper to complete this report if necessary.) COMMITTEE A. Supported B. Opposed A. Supported Ms. Chavon Carr County Probation of the classify by party.) B. Opposed B. Opposed B. Opposed B. Opposed COMMITTEE A. Supported B. Opposed B. Opposed

FORM GPAC ADDENDUM

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					r ago r or i r
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Baptist Ministers' Assoc	ciation of Houston & \	Vicinity PAC		00018745	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ms. Lillian Alexander Distric	t Judge	
(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.)				
COMMITTEE	1. Candidates	A. Supported	Ms. Takasha Francis Distric	t Judge	
ACTIVITY	(Identify by name or, if applicable, classify by party.)			J	
(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.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Carl Sherman U. S. Ser	nator.	
(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.)				
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SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

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18 Filer ID 00018		mmission Filers)					
00018	745						
	SUB ⁻	TOTAL AMOUNT					
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS							
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS							
	\$	0.00					
ORATION OR LABOR	\$						
IS FROM CORPORATION OR	\$						
DN OR LABOR ORGANIZATION	\$						
RATION OR LABOR	\$						
ATION OR LABOR ORGANIZA	TION \$						
	\$	0.00					
AL CONTRIBUTIONS	\$	0.00					
	\$	0.00					
12. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS							
13. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD							
FICAL CONTRIBUTIONS	\$						
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER							
	PORATION OR LABOR AS FROM CORPORATION OR ON OR LABOR ORGANIZATION RATION OR LABOR RATION OR LABOR ORGANIZA AL CONTRIBUTIONS TICAL CONTRIBUTIONS	\$ PORATION OR LABOR \$ PORATION OR LABOR \$ PON OR LABOR ORGANIZATION \$ PRATION OR LABOR \$ PRATION OR LABOR ORGANIZATION \$ PRATION OR LABOR ORGANIZATION \$ PRATION OR LABOR ORGANIZATION \$ PRATICAL CONTRIBUTIONS					

	MONEI	ARY POLITICAL CON	NIRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to c	complete this forr	n.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 9/14	
2	FILER NAME	ters' Association of Houston & Vici	nity PAC		3	Filer ID (Ethics Commission 00018745	n Filers)
_	•				Ļ		
4	Date 02/20/2024	Alexander, Lillian (Ms.)	ut-of-state PAC (ID#:)	'	Amount of Contribution (\$)	\$750.00
		6 Contributor address; City; State; Z	ip Code				
		Houston, TX 77001					
8	Principal occu Attoney	pation / Job title (See Instructions)	9	Employer (See Instructions NA	i)		
	Date	Full name of contributor 0	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/16/2024	Allen, Alma (Ms.)					\$1,000.00
		Contributor address; City; State; Z	ip Code				
		•					
		Houston, TX 77047					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	State Rep.			State of Texas			
	Date	Full name of contributor 0	ut-of-state PAC (ID#:			Amount of Contribution (\$)	
	02/19/2024	Bess, Danielle (Ms.)					\$1,000.00
		Contributor address; City; State; Zip Code					
		Houston, TX 77288					
	•	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Realtor			NA			
	Date	Full name of contributor 0	ut-of-state PAC (ID#:			Amount of Contribution (\$)	
	02/20/2024	Caesar, Rosalind (Ms.)					\$1,000.00
		Contributor address; City; State; Z					
		Houston, TX 77290					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Manager			NA			
	Date	Full name of contributor 0	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/19/2024	Carr, Chavon (Ms.)					\$750.00
		Contributor address; City; State; Z	ip Code				
		Houston, TX 77007					
		pation / Job title (See Instructions)		Employer (See Instructions	()		
	Probate Atto	rney		NA			

	MONET	ARY POLITICAL CONTRIBUT	ION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete thi	s for	m.	1	Total pages Schedule A1: Sch: 2/4 Rpt: 10/14	
2	FILER NAME Baptist Minis	ters' Association of Houston & Vicinity PAC			3	Filer ID (Ethics Commission 00018745	n Filers)
4	Date 02/19/2024	 Full name of contributor out-of-state PAC (II Carter, Kyle (Mr.) Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Bellaire, TX 77401 pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Judge			Harris County			
	Date 02/20/2024	Full name of contributor out-of-state PAC (II Francis, Takasha (Ms.) Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$750.00
	Deinainal assu	Houston, TX 77230		Employer (Co.s. Instructions	<u>, </u>		
	Attorney	pation / Job title (See Instructions)		Employer (See Instructions NA	5)		
	Date	Full name of contributor	D#·)		Amount of Contribution (\$)	
Date Full name of contributor O2/19/2024 Jackson-Lee, Sheila (Ms.) Contributor address; City; State; Zip Code				V	\$2,000.00		
		Houston, TX 77004					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions United States	5)		
	Date 02/17/2024	Full name of contributor out-of-state PAC (II King, Vivian (Ms.) Contributor address; City; State; Zip Code Houston, TX 77004				Amount of Contribution (\$)	\$750.00
	Principal occu Lawyer	pation / Job title (See Instructions)		Employer (See Instructions Harris County	5)		
	Date 02/19/2024	Full name of contributor out-of-state PAC (II Morris, Brittanye (Ms.) Contributor address; City; State; Zip Code Spring, TX 77379	D#:			Amount of Contribution (\$)	\$750.00
	Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instructions Harris County)		
			•				

	MONEI	ARY POLITICAL (CONTRIBUTION	N	5		SCHEDUI	E A1
	The Instru	ction Guide explains hov	to complete this fo	rm	ı.	1	Total pages Schedule A1: Sch: 3/4 Rpt: 11/14	
2	FILER NAME Baptist Minis	sters' Association of Houston	& Vicinity PAC			3	Filer ID (Ethics Commission 00018745	on Filers)
4	Date 02/20/2024	5 Full name of contributorOgg, Kim (Ms.)6 Contributor address; City; S	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$2,000.00
8	Principal occu District Attor	Houston, TX 77265 pation / Job title (See Instructions ney	s) <u></u> g		Employer (See Instructions Harris County)		
	Date 02/19/2024	Full name of contributor Perdue, Nicole (Ms.) Contributor address; City; S Houston, TX	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$750.00
	Principal occu Attorney	pation / Job title (See Instructions	5)		Employer (See Instructions NA)		
	Date 02/18/2024	Full name of contributor Phillips, James (Mr.) Contributor address; City; S Houston, TX	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$1,000.00
	Principal occu Harris Count	I pation / Job title (See Instructions	5)		Employer (See Instructions Harris County)		
	Date 02/19/2024	Full name of contributor Sherman, Carl (Mr.) Contributor address; City; S Desoto, TX 75115	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Pastor & Sta	pation / Job title (See Instructions ate Rep.	5)		Employer (See Instructions Church & State of Texas			
	Date 02/19/2024	Full name of contributor Thierry, Shawn (Ms.) Contributor address; City; S Houston, TX 77063	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu State Rep.	pation / Job title (See Instructions	5)		Employer (See Instructions State of Texas)		
			'					

TARY POLITICAL CONTRIBUTI	ON	IS		SCHEDULE A1
ruction Guide explains how to complete this	n.	1	Total pages Schedule A1: Sch: 4/4 Rpt: 12/14	
E nisters' Association of Houston & Vicinity PAC			3	Filer ID (Ethics Commission Filers) 00018745
5 Full name of contributor out-of-state PAC (ID# Thornton, Cheryl (Ms.) 6 Contributor address; City; State; Zip Code	t:)	7	Amount of Contribution (\$) \$750.00
Houston, TX 77021 cupation / Job title (See Instructions)	9		<u> </u> S)	
		Harris County		
11 11	uction Guide explains how to complete this E nisters' Association of Houston & Vicinity PAC 5 Full name of contributor out-of-state PAC (ID# Thornton, Cheryl (Ms.) 6 Contributor address; City; State; Zip Code Houston, TX 77021	uction Guide explains how to complete this form Enisters' Association of Houston & Vicinity PAC 5 Full name of contributor out-of-state PAC (ID#:	S Full name of contributor	uction Guide explains how to complete this form. 1

PLEI	DGED CONTRIBUTIONS		SCHEDULE B
Т	he Instruction Guide explains how to	1 Total pages Schedule B: Sch: 1/1 Rpt: 13/14	
2 FILER N			3 Filer ID (Ethics Commission Filers)
	Ministers' Association of Houston & Vicinity F	00018745	
4 TOTAL	OF UNITEMIZED PLEDGES		\$ 0.00
5 Date	6 Full name of pledgor out-of-state	PAC (ID#:	9 In-kind description pledge (\$) (If applicable)
	7 Pledgor Address; City; State;	Zip Code	
			Check if travel outside of Texas. Complete Schedule
10 Principal	occupation / Job title (See Instructions)	11 Employer (See In	structions)

	LOANS SCHEDULE E							
	The Instructio	on Guide explains how to comp	orm.	1 Total pages Schedule E: Sch: 1/1 Rpt: 14/14				
2	FILER NAME Baptist Ministers	NAME at Ministers' Association of Houston & Vicinity PAC			3 Filer ID (Ethics Commission Filers) 00018745			
4	TOTAL OF UN	IITEMIZED LOANS				\$	0.00	
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount	(\$)	
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Rate		
						11 Maturity Date		
12	Principal occupation	on / Job title (See Instructions)	13 Employer (See Instructions)					
14	Description of Collateral None			15 Check if personal f	unds were deposit		d into political account (See Instructions)	
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guara	anteed (\$)	
	not applicable	18 Guarantor address; City;	State;	Zip Code				
20 Principal occupation			21 Employer (See Inst	ructions)				