MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

The MPAC Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00015721	2 Total pages filed:7
3 COMMITTEE NAM			OFFICE USE ONLY
BracewellPAC			
			Date Received
			ELECTRONICALLY FILED
			04/02/2024
4 COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP	
ADDRESS			
	711 Louisiana, Ste. 2300		
Change of Addre	^s Houston, TX 77002-2781		Date Hand-delivered or Date Postmarked
5 CAMPAIGN	MS/MRS/MR FIRST	N	II
TREASURER	Ms. Patricia	н	Receipt # Amount
NAME			
			Date Processed
	NICKNAME LAST	S	UFFIX
	Adams		Date Imaged
	Addins		Date imaged
0.000			
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE)	; APT / SUITE #; CITY;	STATE; ZIP CODE
STREET	711 Louisiana St.		
ADDRESS	Ste. 2300		
(Residence or Business)	Houston, TX 77002-2781		
7 CAMPAIGN TREASURER	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY;	STATE; ZIP CODE
MAILING	711 Louisiana St.		
ADDRESS	Ste. 2300		
Change of Addre	s Houston, TX 77002-2781		
8 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	EXTENSION	
PHONE	(713) 221-1593		
9 REPORT TYPE		10th day after campaign	
	X Monthly	L treasurer termination	Dissolution (Attach PAC-DR)
10 MONTHLY			
REPORT FILING	January 5 X Apr	il 5 July 5	October 5
DEADLINE			
	February 5 May	/ 5 August 5	November 5
	March 5 Jun	e 5 Septembe	r 5 December 5
11 PERIOD	Month Day Year	TURQUQU N	lonth Day Year
COVERED	02/26/2024	THROUGH 0	3/25/2024
GO TO PAGE 2			
Forms provided by T	exas Ethics Commission www.e	thics.state.tx.us	Version V3.5.1.5b35d027

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
BracewellPAC			00015721	
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		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted	Jerry Davis Harris County Tax	Assessor	
	(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 IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA	· •	\$	0.00
	(OTHER THAN PLEI	DGES, LOANS, OR GUARANTEES OF LOANS)	Ŭ.	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	9,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	18,295.40
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT	•		•	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Ms. Patrici	a H. Adams	
		Signature of Car		irer
		-	-	
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, th	is the	day
		which, witness my hand and seal of office.		
Signature of officer ad	lministering oath	Printed name of officer administering oath	Title of offic	cer administering oath
Forms provided by Texas E	Ethics Commission	www.ethics.state.tx.us		Version V3.5.1.5b35d02

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC

Page 3 of 7

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
BracewellPAC				00015721	
14 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. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted		Tom Maynard State Board of Ed	lucation, Distric	et 10
	(Identify by name or, if applicable, classify by party.)				
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			
	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.)		Sen. Royce West State Senator		
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			
	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.)		Chris Hollins Controller, City of H	Houston	

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC

					Page 4 of 7
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
BracewellPAC				00015721	· ·
14 COMMITTEE	1. Candidates	A. Supported			
ACTIVITY					
	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain		B. Opposed			
paper to complete this report if necessary.)		- -			
report in necessary.)					
	2. Measures	A. Supported			
	(Describe by date and location of election and				
	nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted		Laolu Davies-Yemitan HCC Boa	ard of Trustees	
	(Identify by name or, if				
	applicable, classify by party.)				

SUBI	OTALS - MPAC	C	FORM MPAC OVER SHEET PG 3 5 of 7
17 COMMIT Bracewe		18 Filer ID 00015721	(Ethics Commission Filers)
	LE SUBTOTALS SCHEDULE	I	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$
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	\$ 9,000.00
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	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	\$
			1

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/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 6/7	BracewellPAC 00015721
4 Date	5 Payee name
03/18/2024	Chris Hollins for City Controller
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,000.00	P.O. Box 56386
Expenditure from corporate funds	Houston, TX 77256
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 Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Political contribution, Chris Hollins, Controller, City of Houston
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/04/2024	Jerry Davis Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	2214 Chimney Rock Road
Expenditure from corporate funds	Houston, TX 77056
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee Political contribution, TX, officeholder living expense Political contribution, Jerry Davis, Harris County Tax
	Assessor
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/18/2024	Laolu Davies-Yemitan Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	2418 Elgin Street
Expenditure from corporate funds	Houston, TX 77004
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee
	Political contribution, Laolu Davies-Yemitan, HCC Board of Trustees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I 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: 2/2 Rpt: 7/7	BracewellPAC 00015721
4 Date	5 Payee name
03/18/2024	Royce West Campaign Committee
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 6514
Expenditure from corporate funds	Houston, TX 77265
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
	Political contribution, Royce West, Texas State Senator
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/04/2024	Tom Maynard Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1701 Congress Avenue
\$1,000.00	
Expenditure from corporate funds	Austin, TX 78701
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Political contribution, Tom Maynard, State Board of Education - District 10
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	