#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00016597 3 COMMITTEE NAME **OFFICE USE ONLY** Boating Trades Association of Metropolitan Houston PAC Date Received **ELECTRONICALLY FILED** 03/04/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 8909 Knight Rd. Change of Address Houston, TX 77054-4303 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Maxey K. NAME Date Processed **NICKNAME** LAST **SUFFIX** Date Imaged Lovell Ш CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 8909 Knight Rd. STREET **ADDRESS** (Residence or Business) Houston, TX 77054 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 8909 Knight Rd. MAILING **ADDRESS** Change of Address Houston, TX 77054 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 526-6361 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 X March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 01/26/2024 02/25/2024

**GO TO PAGE 2** 

## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

13 Filer ID (Ethics Commission of Metropolitan Houston PAC   14 COMMITTEE ACTIVITY   15 CONTRIBUTION TOTALS   15 CONTRIBUTION Metropolitan Houston PAC   14 Supported   15 Contract   1	ssion Filers)
1. Candidates (Identify by name or, if applicable, classify by party.)    A. Supported	
ACTIVITY  (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.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  B. Opposed  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)  \$ CONTRIBUTION MADE ELECTRONICALLY)	
(Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  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.)  5. CONTRIBUTION TOTALS  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)  \$	
paper to complete this report if necessary.)  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.)  5. CONTRIBUTION TOTALS  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)  \$	
(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.)  5. CONTRIBUTION    TOTAL  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)  \$	
(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.)  5. CONTRIBUTION    TOTAL  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)  \$	
3. Officeholders    Assisted    (Identify by name or, if applicable, classify by party.)  5. CONTRIBUTION    TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)  \$	
Assisted (Identify by name or, if applicable, classify by party.)  5 CONTRIBUTION TOTALS  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)  \$	
(Identify by name or, if applicable, classify by party.)  5 CONTRIBUTION TOTALS  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)  \$	
TOTALS PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) \$	
	0.00
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  \$	0.00
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS \$	0.00
4. TOTAL POLITICAL EXPENDITURES \$	7,250.00
CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$	51,772.89
OUTSTANDING LOAN TOTALS  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  \$	0.00
6 AFFIDAVIT	
I swear, or affirm, under penalty of perjury, that the accompanying retrue and correct and includes all information required to be reported under Title 15, Election Code.	port is by me
Maxey K. Lovell II	
Signature of Campaign Treasurer	
AFFIX NOTARY STAMP / SEAL ABOVE	
Sworn to and subscribed before me, by the said, this the	day
of, 20, to certify which, witness my hand and seal of office.	uay
ol	
Signature of officer administering oath Printed name of officer administering oath Title of officer administering	

### **SUBTOTALS - MPAC**

## FORM MPAC COVER SHEET PG 3

			3 of 8
17 COMMITTEE NAME18 Filer IDBoating Trades Association of Metropolitan Houston PAC00016597		(Ethics Commission Filers)	
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE			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 LABOR ORGANIZATION		\$	
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$	
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 C	ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 7,250.00
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		\$	
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	
15.	15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

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

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: 1/5 Rpt: 4/8	Boating Trades Association of Metropolitan Houston PAC 00016597		
4 Date	5 Payee name		
02/19/2024	Ashby, Trent (The Honorable)		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$1,000.00	P. O. Box 412		
Expenditure from corporate funds	Lufkin, TX 75902		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Consulting Expense		
	Check if Austin, TX, officeholder living expense		
	\$1,000.00		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/O			
Date	Payee name		
02/19/2024	Bailes, Ernest (The Honorable)		
Amount (\$)	Payee address; City; State; Zip Code		
\$500.00	PO Box 1232		
Ψ300.00	1 0 00 1232		
Expenditure from corporate funds	Shepherd, TX 77371		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense \$500.00		
	φ300.00		
Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/O			
Date	Payee name		
02/19/2024	Clardy, Travis (The Honorable)		
Amount (\$)	Payee address; City; State; Zip Code		
\$500.00	209 E Main St		
Expenditure from corporate funds	Nacogdoches, TX 75961		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description		
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
	\$500.00		
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/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Politing Expense Travel in District Travel Out of District			
1 Total pages Schedule F1: Sch: 2/5 Rpt: 5/8	2 FILER NAME Boating Trades Association of Metropolitan Houston PAC 3 Filer ID (Ethics Commission Filers) 00016597			
4 Date 02/19/2024	5 Payee name Geren, Charles (The Honorable)			
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 1440			
Expenditure from corporate funds	Fort Worth, TX 76101			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense \$500.00			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date 02/19/2024	Payee name Hefner, Cole (The Honorable)			
Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 167			
Expenditure from corporate funds	Mount Pleasant, TX 75456			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense \$500.00			
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			
Date 02/19/2024	Payee name Holland, Justin (The Honorable)			
Amount (\$) \$500.00	Payee address; City; State; Zip Code 3021 Ridge Rd - Suite A Box 79			
Expenditure from corporate funds	Rockwall, TX 75032			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  500.00			
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
Forms provided by Texas F	thics Commission www.ethics.state.tx.us Version V3.5.1.5b35d027			

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of 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: 3/5 Rpt: 6/8	Boating Trades Association of Metropolitan Houston PAC  00016597
4 Date	5 Payee name
02/19/2024	King, Ken (The Honorable)
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code PO Box 517
Expenditure from corporate funds	Canadian, TX 79014
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense
LAFENDITORE	Check if Austin, TX, officeholder living expense
	250.00
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/19/2024	Leach, Jeff (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO 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	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	500.00
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/19/2024	Meyer, Morgan (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	3838 Oak Lawn Ave Suite 400
Expenditure from corporate funds	Dallas, TX 75219
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense  Consulting Expense  Consulting Expense  Consulting Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	500.00
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

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

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

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: 4/5 Rpt: 7/8	Boating Trades Association of Metropolitan Houston PAC 00016597		
4 Date	5 Payee name		
02/19/2024	Phelan, Dade		
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code P. O. Box 848		
Expenditure from			
corporate funds	Nederland, TX 77627		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense		
	\$1,000.00		
	42,000,00		
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
02/19/2024	Shine, Hugh (The Honorable)		
Amount (\$)	Payee address; City; State; Zip Code		
\$500.00	PO 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	Consulting Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense		
	\$500.00		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
02/19/2024	Stucky, Lynn (The Honorable)		
Amount (\$)	Payee address; City; State; Zip Code		
\$500.00	PO Box 464		
Expenditure from corporate funds	Denton, TX 76202		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense		
	\$500.00		
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Office Overnead/Rental Expense Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense Printing Expense al Committee Legal Services Salaries/Wages/Contract Labor	Travel in District Travel Out of District
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: 5/5 Rpt: 8/8	Boating Trades Association of Metropolitan Houston PAC	00016597
4 Date	5 Payee name	-
02/19/2024	Troxclair, Ellen (The Honorable)	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$500.00	701 Hwy 281 Suite H #196	
·		
Expenditure from corporate funds	Marble Falls, TX 78654	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Consulting Expense	avel outside of Texas. Complete Schedule T.
	\$500.00	ustin, TX, officeholder living expense
	\$500.00	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		Office field