FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00063381 3 COMMITTEE NAME **OFFICE USE ONLY** Cobb Fendley PAC Date Received **ELECTRONICALLY FILED** 03/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 4424 W. Sam Houston Parkway North Suite 600 Change of Address Houston, TX 77041 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Monica F. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Silver CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER 4424 W. Sam Houston Parkway North STREET **ADDRESS** Suite 600 (Residence or Business) Houston, TX 77041 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 4424 W. Sam Houston Parkway North MAILING **ADDRESS** Suite 600 Change of Address Houston, TX 77041 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 462-3242 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

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Cobb Fendley PAC			00063381	-
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. Julian Ramirez Houston Ci	ty Council, A	At-Large 1
(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 IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	IL CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	11,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	208,468.47
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.	rjury, that the nation require	accompanying report is d to be reported by me
		Monica	F. Silver	
		Signature of Car	npaign Treasi	urer
AFFIX NOTAR)	/ STAMP / SEAL ABOVE			
		, th	is the	day
of	_, 20, to certify	which, witness my hand and seal of office.		
Signature of officer ac	dministering oath	Printed name of officer administering oath	Title of offi	cer administering oath

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

			Page 3 of 11
12 COMMITTEE NAME			13 Filer ID (Ethics Commission Filers)
Cobb Fendley PAC			00063381
14 COMMITTEE ACTIVITY	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.)		Commissioner Darrell Hale Collin County Commissioner, Precinct 3
COMMITTEE	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	
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Commissioner Andy Meyers Fort Bend County Commissioner, Precinct 3
COMMITTEE ACTIVITY	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	
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Commissioner Justin Beckendorff Waller County Commissioner, Precinct 4

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC ADDENDUM

					Page 4 of 11
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Cobb Fendley PAC				00063381	
14 COMMITTEE ACTIVITY	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			
	Measures (Describe by date and	A. Supported			
	location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Sen. Nathan Johnson State Ser	nator	
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 (Identify by name or, if applicable, classify by party.)		Rep. Harold Dutton State Repre	esentative	
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			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if		Rep. Briscoe Cain State Repres	sentative	
	applicable, classify by party.)				

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

12 COMMITTEE NAME Cobb Fendley PAC					13 Filer ID	(Ethics Commission Filers)
Cobb Fendley PAC					I	,
					00063381	
ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Taral Patel 3	Candidate for Fo	ort Bend County	y Commissioner, Precinct
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures	A. Supported				
	(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.)					
	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				
	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.)		The Honorable	Louis Rigby Mag	yor of the City o	f La Porte
A OTIV (IT) (Candidates (Identify by name or, if	A. Supported				
	applicable, classify by party.)					
(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				
	3. Officeholders Assisted		Rep. Trent Ash	by State Repres	entative	
	(Identify by name or, if applicable, classify by party.)					

FORM MPAC MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 6 of 11 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) Cobb Fendley PAC 00063381 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 A. Supported 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Commissioner Kendric Jones Waller County Commissioner, Precinct 3 Assisted (Identify by name or, if applicable, classify by party.

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				7 of 11
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethics Commission Filers)
Col	bb Fen	dley PAC	00063381	
19 SCI	HEDULE			
NAI	ME OF	SCHEDULE		SUBTOTAL AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	П	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
				·
3.	П	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
	Ш			Ψ
4.	П	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	R	
, .	Ш	ORGANIZATION		a
_		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	TION OR	
5.	Ш	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.	П	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	s
	Ш			Ψ
9.	П	SCHEDULE E: LOANS		6
9.	Ш	SCHEDOLE E. LOANS		\$
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 11,500.00
11.	Ш	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		 \$
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.	П	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
				Ť
14.	П	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	
	Ш	CONEDULE I. NON I CENTONE EXILENDITORECT NOM I CENTONE CONTRIBUTION	5140]3
15		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F	RETURNED	
15.	Ш	TO FILER		\$

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal 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
OTHER (outer a category not listed above)

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: 1/4 Rpt: 8/11	Cobb Fendley PAC 00063381							
•	·							
	5 Payee name							
02/02/2024	Andy Meyers Campaign							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$1,000.00	P.O. Box 2545							
Expenditure from corporate funds	Stafford, TX 77497							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By							
EXPENDITURE	Candidate/Officeholder/Political Committee							
	Campaign Contribution							
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/OI	1							
Date	Payee name							
02/02/2024	Briscoe Cain for Texas							
	2.0000							
Amount (\$)								
\$500.00	P.O. Box 7							
Expenditure from								
corporate funds	Deer Park, TX 77536							
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF EXPENDITURE	Contributions/Donations Made By							
EXI ENDITORE	Candidate/Officeholder/Political Committee							
	Campaign Contribution							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
experience to belief of or								
Date	Payee name							
02/01/2024	Darrell Hale Campaign							
Amount (\$)	Payee address; City; State; Zip Code							
\$1,000.00	3705 Amon Carter Drive							
Expenditure from corporate funds	McKinney, TX 75070							
	·							
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By							
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	Campaign Contribution							
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/OI								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rtising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal 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

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: 2/4 Rpt: 9/11	Cobb Fendley PAC 00063381
4 Date	5 Payee name
02/02/2024	Harold Dutton Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	4001 Jewett Street
- "	
Expenditure from corporate funds	Houston, TX 77026
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Campaigh Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/01/2024	Julian Ramirez Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 55484
Expenditure from corporate funds	Houston, TX 77255
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Candidate for Houston City Council, At-Large 1
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/02/2024	Justin Beckendorff Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	3506 Pitts Road
·	
Expenditure from corporate funds	Katy, TX 77493
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

xpense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal 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 - Girl/Awards/Memorials Expense Printing Expense I ravel Out of District Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) 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: 3/4 Rpt: 10/11	Cobb Fendley PAC 00063381							
4 Date	5 Payee name							
02/21/2024	Kendric Jones Campaign							
6 Amount (\$)	7 Payee address; City; State; Zip Code							
\$1,500.00	P.O. Box 2180							
Expenditure from corporate funds	Prairie View, TX 77446							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.							
EXPENDITURE	Candidate/Officeholder/Political Committee							
	Campaign Contribution							
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/OI	1							
Date	Payee name							
02/19/2024	Louis Rigby for Mayor							
Amount (\$)	Payee address; City; State; Zip Code							
\$500.00	3115 Woodland Court							
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,								
Expenditure from	La Danta TV 77574							
corporate funds	La Porte, TX 77571							
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description							
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.							
	Candidate/Officeholder/Political Committee							
	Campaign Contribution							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
experientare to benefit 6/61	<u> </u>							
Date	Payee name							
02/02/2024	Nathan Johnson Campaign							
Amount (\$)	Payee address; City; State; Zip Code							
\$500.00	P.O. Box 670994							
Expenditure from corporate funds	Dallas, TX 75367							
PURPOSE								
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made Ry (b) Description Check if travel outside of Texas. Complete Schedule T.							
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	Campaign Contribution							
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/OI								

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal 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
OTHER (other a cottographed listed above)

Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Service	Legal Services			category not listed above)
		ction Guide explains now to co	ompiete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)	
Sch: 4/4 Rpt: 11/11	Cobb Fendley PAC				
4 Date	5 Payee name				
02/02/2024	Taral Patel Campaig	n			
6 Amount (\$)	7 Payee address; Ci	ty; State; Zip Co	ode		
\$2,000.00	P.O. Box 2653				
•					
Expenditure from corporate funds	Sugar Land, TX 774	87			
8 PURPOSE	(a) Category (See Categories	listed at the top of this schedule)	(b) Description		
OF	Contributions/Donati			outside of Texas. Com	plete Schedule T.
EXPENDITURE		der/Political Committee	Check if Austin,	, TX, officeholder living	j expense
			Campaign Co	ontribution	
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder ı	name Office sou	<u>I</u> ught	Office he	eld
Date	Payee name				
02/20/2024	Texans for Trent Asl	nby			
Amount (\$)	Payee address; Ci	ty; State; Zip Co	ode		
\$500.00	P.O. Box 41964	y,, p			
Ψ500.00	1 .O. BOX 41304				
Expenditure from					
corporate funds	Houston, TX 77241				
PURPOSE	(a) Category (See Categories	listed at the top of this schedule)	(b) Description		
OF	Contributions/Donati			outside of Texas. Com	plete Schedule T.
EXPENDITURE		der/Political Committee	Check if Austin,	, TX, officeholder living	j expense
			Campaign Co	ontribution	
Complete ONLY if direct	Candidate/Officeholder i	name Office sou	laht	Office he	elq .
expenditure to benefit C/O			-9···	000	