#### 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) 00066105 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Latino Conservatives PAC Date Received **ELECTRONICALLY FILED** 03/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P. O. Box 130853 Change of Address Houston, TX 77219-0853 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Mr. Hector G. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Longoria CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER 642 Heights Blvd. STREET **ADDRESS** (Residence or Business) Houston, TX 77007 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 642 Heights. Blvd. MAILING **ADDRESS** Change of Address Houston, TX 77007 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 561-3334 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

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texas Latino Conserv	atives PAC		00066105	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Orlando Sanchez City of Hous	ton Controlle	r
(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 PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	274,212.71
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	263,253.34
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	86,152.90
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT	<u>'</u>		·	
		I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code.	jury, that the a nation required	ccompanying report is to be reported by me
		Mr. Hector	G. Longoria	
		Signature of Car	npaign Treasur	rer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said	, th	is 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 offic	er administering oath

### **SUBTOTALS - MPAC**

# FORM MPAC COVER SHEET PG 3

					3 of 19
<b>17</b> COM	ИМІТТЕ	E NAME	18 Filer ID	(Ethic	s Commission Filers)
Texa	as Lati	no Conservatives PAC	00066105	`	,
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE  SUBTOTAL AMOUNT					
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	274,212.71
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	TION 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 (	DRGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	263,253.34
11.	11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$				
12.	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 CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRI	BUTION	S		SCHEDULE A1
	The Instruc	ction Guide explains how to comple	ete this forr	n.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/19
2	FILER NAME Texas Latino	Conservatives PAC			3	Filer ID (Ethics Commission Filers) 00066105
4	Date 01/31/2024	Akerly, Shelly  6 Contributor address; City; State; Zip Code	e PAC (ID#:		7	Amount of Contribution (\$) \$100.00
8	Principal occu	Coppell , TX 75019 pation / Job title (See Instructions)	9	Employer (See Instructions	i)	
	Project Mana			Spectrum Advisors	,	
	Date 02/02/2024	Full name of contributor out-of-state Coalition Por Texas PAC Contributor address; City; State; Zip Code	e PAC (ID#:			Amount of Contribution (\$) \$60,185.00
		Dallas, TX 75219			<u> </u>	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 02/05/2024	Full name of contributor out-of-state  Coalition Por Texas PAC  Contributor address; City; State; Zip Code	e PAC (ID#:			Amount of Contribution (\$) \$177,857.71
	Dringinal occu	Dallas, TX 75219 pation / Job title (See Instructions)		Employer (See Instructions	·/ 	
	i illicipai occu	pation / sob the (See instructions)		Employer (See manuchons	')	
	Date 02/22/2024	Coalition Por Texas PAC		)		Amount of Contribution (\$) \$36,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 01/29/2024	Full name of contributor out-of-state Guel-Escobar, Hercie Contributor address; City; State; Zip Code San Antonio, TX 78209	e PAC (ID#:	)		Amount of Contribution (\$) \$25.00
	Principal occu Paralegal	pation / Job title (See Instructions)		Employer (See Instructions Chamberlain Hrdlicka	5)	
	i araicydi			CHAIIDCHAIII FILUIICKA		

Texas Latino Conservatives PAC  4 Date	1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/19 3 Filer ID (Ethics Commission Filers) 00066105 7 Amount of Contribution (\$) \$45.00
4 Date 01/31/2024 5 Full name of contributor out-of-state PAC (ID#:) Sanchez, Orlando 6 Contributor address; City; State; Zip Code Houston, TX 77219  8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	<ul> <li>3 Filer ID (Ethics Commission Filers) 00066105</li> <li>7 Amount of Contribution (\$) \$45.00</li> </ul>
01/31/2024 Sanchez, Orlando  6 Contributor address; City; State; Zip Code  Houston, TX 77219  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)	\$45.00
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	(a)
Consultant Self-employed	

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/14 Rpt: 6/19	Texas Latino Conservatives PAC	00066105
4 Date	5 Payee name	
01/29/2024	CVS	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$21.41	4323 San Felipe St Rd	
Expenditure from		
corporate funds	Houston, TX 77027	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Cups and drinks- Leadership Latino Elect Class
		Supplemental anning Education Plant Class
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI		•
Date	Payee name	
01/29/2024	Cabrera, Luis	
Amount (\$)	Payee address; City; State; Zip Co	de
\$5,000.00	22156 New Combes Hwy	
***,*******		
Expenditure from corporate funds	Harlingen, TX 78550	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Field Rep.
		•
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI	1	
Date	Payee name	
01/30/2024	Cabrera, Luis	
Amount (\$)	Payee address; City; State; Zip Co	de
\$2,000.00	22156 New Combes Hwy	
Expenditure from corporate funds	Harlingen, TX 78550	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Texas Latino Conservatives Pastors event
Complete ONLY if divert	Condidate/Officeholder some	other Control of
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
•		

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/14 Rpt: 7/19	Texas Latino Conservatives PAC	00066105
4 Date	5 Payee name	
01/31/2024	Cabrera, Luis	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$1,084.01	22156 New Combes Hwy	
Expenditure from corporate funds	Harlingen, TX 78550	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Food and Lodging for TLCP event
		Tood and Loughing for TEOT event
9 Complete ONLY if direct	Candidate/Officeholder name Office sour	aht Office held
expenditure to benefit C/OI		gric Office field
Data		
Date	Payee name	
02/01/2024	Camelback Strategy Group	
Amount (\$)	Payee address; City; State; Zip Co	de
\$27,200.00	2801 E Camelback Rd 220	
Expenditure from		
corporate funds	Phoenix, AZ 85016	
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  Hispanic Outreach
		Hispanic Odueach
Complete ONLY if direct	Candidate/Officeholder name Office sour	ght Office held
expenditure to benefit C/OI	•	gnt Office field
<u> </u>		
Date	Payee name	
01/27/2024	Cantu, Sabrina	
Amount (\$)	Payee address; City; State; Zip Co	de
\$300.00	5809 Palm Valley Dr.	
Expenditure from		
corporate funds	Harlingen , TX 78552	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Food and lodging reimbursement- Leadership Latino Elect Class
Complete ONII V If all a	Condidate/Officeholder verse	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	gnt Onice neid

### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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: 3/14 Rpt: 8/19	Texas Latino Conservatives PAC 00066105
4 Date	5 Payee name
02/05/2024	DigiClicks
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,400.00	4201 Main St.
	Ste. 200
Expenditure from corporate funds	Houston, TX 77002
8 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  Website service
	Website Service
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-
Date	Payee name
02/01/2024	Frost Bank
Amount (\$)	Payee address; City; State; Zip Code
\$15.00	5925 Kirby Dr.
Expenditure from corporate funds	Houston, TX 77005
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Wire Fee
	Which do
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/05/2024	Frost Bank
Amount (\$)	Payee address; City; State; Zip Code
\$15.00	5925 Kirby Dr.
Expenditure from corporate funds	Houston, TX 77005
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Accounting/Banking  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Wire Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

### 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 Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District 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: 4/14 Rpt: 9/19	Texas Latino Conservatives PAC	00066105
4 Date	5 Payee name	
02/05/2024	Frost Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$30.00	5925 Kirby Dr.	
400.00		
Expenditure from	Houston TV 7700F	
corporate funds	Houston, TX 77005	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	ural autoida of Tayan Complete Schadula T
EXPENDITURE	/ tocounting/ Danking	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
	Wire Fee	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		
Date	Dayse name	
02/05/2024	Payee name Frost Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$30.00	5925 Kirby Dr.	
Expenditure from		
corporate funds	Houston, TX 77005	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	/ Accounting/Banking	vel outside of Texas. Complete Schedule T.
		stin, TX, officeholder living expense
	Wire Fee	
0 1 0 0 1 0 1		200
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
<u>'</u>		
Date	Payee name	
02/07/2024	Frost Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$30.00	5925 Kirby Dr.	
Funonditure from		
Expenditure from corporate funds	Houston, TX 77005	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	_ · · · · · · · · · · · · · · · · · · ·	vel outside of Texas. Complete Schedule T.
EXPENDITURE		stin, TX, officeholder living expense
	Wire Fee	
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	PH	

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 5/14 Rpt: 10/19	Texas Latino Conservatives PAC	00066105
4 Date	5 Payee name	
02/07/2024	Frost Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Code	9
\$30.00	5925 Kirby Dr.	
Expenditure from corporate funds	Houston, TX 77005	
8 PURPOSE OF	, , ,	Description
EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Wire Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/O		Cine Held
Data		
Date	Payee name	
01/29/2024	Garcia, Vanessa	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,000.00	3152 Hidden Valley Dr.	
Evpanditure from		
Expenditure from corporate funds	El Paso, TX 79938	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Field Rep.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	office held
experiulture to benefit 6,01	<u> </u>	
Date	Payee name	
01/27/2024	Gonzalez, Princess	
Amount (\$)	Payee address; City; State; Zip Code	
\$99.44	607 S. Veterans Blvd. #12	
Expenditure from corporate funds	San Juan, TX 78589	
PURPOSE	·	A December
OF PURPOSE	(a) Category (See Categories listed at the top of this schedule)  Event Expense	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Eveni Expense	Check if Austin, TX, officeholder living expense
		Food and lodging reimbursement- Leadership Latino
		Elect Class
Complete ONLY if direct	Candidate/Officeholder name Office sough	ot Office held
expenditure to benefit C/OI	4	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Candidate/Officeholder/Politica Credit Card Payment	al 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: 6/14 Rpt: 11/19	Texas Latino Conservatives PAC 00066105	
4 Date	5 Payee name	
02/15/2024	Graves, John	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$46.87	7831 Royan Dr.	
Expenditure from corporate funds	Houston, TX 77071	
8 PURPOSE		
OF	(a) Category (See Categories listed at the top of this schedule)  Fivent Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Certificates for Leadership Latino Elect Class	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	H	
Date	Payee name	_
02/01/2024	Grond Game Tactics	
Amount (\$)	Payee address; City; State; Zip Code	
\$32,985.00	6724 RIO GRANDE BLVD NW	
<del>+0=</del> ,000.00		
Expenditure from	LOS DANGLOS AIM 07107 6220	
corporate funds	LOS RANCHOS, NM 87107-6330	
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	
	Hispanic Outreach	
	Thispanic Outreach	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Payee name	
01/29/2024	HEB	
Amount (\$)	Payee address; City; State; Zip Code	
\$139.12	5225 Buffalo Speedway	
Expenditure from corporate funds	Houston, TX 77005	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Event Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Food/snacks- Leadership Latino Elect Class	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	

### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Travel in District Travel Out of District
OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1: Sch: 7/14 Rpt: 12/19	FILER NAME     Texas Latino Conservatives PAC	3 Filer ID (Ethics Commission Filers) 00066105
4 Date 01/29/2024	5 Payee name Herrera, Katherine	
6 Amount (\$) \$2,000.00	<b>7</b> Payee address; City; State; Zip Co 6003 Lost Creek Dr.	ode
Expenditure from corporate funds	San Antonio, TX 77223	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Field Rep.
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou H	ight Office held
Date 01/30/2024	Payee name Holiday Inn Express	
Amount (\$) \$2,506.14  Expenditure from	Payee address; City; State; Zip Co	ode
PURPOSE OF EXPENDITURE	Houston, TX 77027  (a) Category (See Categories listed at the top of this schedule)  Event Expense	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Lodging- Leadership Latino Elect Class
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight Office held
Date 01/27/2024	Payee name Liva, Debra	
Amount (\$) \$300.00	Payee address; City; State; Zip Co 528 Port O'Connor	ode
Expenditure from corporate funds	Little Elm, TX 75068	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Event Expense	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Food and lodging reimbursement- Leadership Latino Elect Class

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Office held

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	,
1 Total pages Schedule F1: Sch: 8/14 Rpt: 13/19	2 FILER NAME Texas Latino Conservatives PAC 3 Filer ID (Ethics Commission Filers) 00066105
•	L
4 Date	5 Payee name
01/27/2024	Longoria, Christopher
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$55.98	3400 Saledo Creek Dr. #1005
- "	
Expenditure from corporate funds	San Antonio, TX 78217
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Food and lodging reimbursement- Leadership Latino Elect Class
	Elect Class
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
01/27/2024	Mendez, Michael
Amount (\$)	Payee address; City; State; Zip Code
\$193.19	5409 Palm Valley Dr. N
Expenditure from corporate funds	Harlingen, TX 78552
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Food and lodging reimbursement- Leadership Latino
	Elect Class
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<b>v</b>
Data	
Date	Payee name
02/07/2024	Murphy Nasica and Associates
Amount (\$)	Payee address; City; State; Zip Code
\$35,200.00	919 Congress Ave
Expenditure from	
corporate funds	Austin, TX 78701
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.
D. LIBITORE	Check if Austin, TX, officeholder living expense
	Hispanic Outreach
Commission Chill V III alia	Condidate/Officeholder name Office county
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
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#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political ( Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1:			
Sch: 9/14 Rpt: 14/19	Texas Latino Conservatives PAC  Texas Latino Conservatives PAC  00066105		
4 Date	5 Payee name		
01/27/2024	Nava, Leticia		
6 Amount (\$) \$40.00	<ul><li>7 Payee address; City; State; Zip Code</li><li>5122 St. Nicholas</li></ul>		
,			
Expenditure from corporate funds	San Antonio, TX 78228		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense  Food and lodging reimbursement- Leadership Latino		
	Elect Class		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/O	1		
Date	Payee name		
02/09/2024	O'Malley, Jane		
Amount (\$)	Payee address; City; State; Zip Code		
\$500.00	4912 Holt St.		
Expenditure from corporate funds	Bellaire, TX 77401		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense  Bookkeeping services		
	bookkeeping services		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
01/27/2024	Orlando Sanchez Campaign		
Amount (\$)	Payee address; City; State; Zip Code		
\$2,000.00	P.O. Box 130853		
Expenditure from corporate funds	Houston, TX 77219		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Contributions/Donations Made By		
	Candidate/Officeholder/Political Committee		
	Contribution to the Controller Campaign		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		
experialities to beliefft C/O	•		

### 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

Candidate/Officenolder/Politica 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: 10/14 Rpt: 15/19	Texas Latino Conservatives PAC 00066105	
4 Date	5 Payee name	
01/29/2024	Perez, Alma	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$2,000.00	2112 Dartmouth Ave.	
Expenditure from corporate funds	McAllen, TX 78504	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Salaries/Wages/Contract Labor	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Field Rep.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
02/15/2024	Perez, Alma	
Amount (\$)	Payee address; City; State; Zip Code	
\$159.90	2112 Dartmouth Ave.	
Expenditure from corporate funds	McAllen, TX 78504	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Food and lodging reimbursement- Leadership Latino	
	Elect Class	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Payee name	
01/27/2024	Richards, Art	
Amount (\$)	Payee address; City; State; Zip Code	
\$300.00	3105 Stone Edge Rd.	
Expenditure from corporate funds	El Paso , TX 79904	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Event Expense Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Food and Lodging reimbursement- Leadership	
	Latino Elect Class	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH		

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Polit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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: 11/14 Rpt: 16/19	Texas Latino Conservatives PAC 00066105	
4 Date	5 Payee name	
01/27/2024	Richards, Silvia	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$300.00	3105 Stone Edge Rd.	
Expenditure from		
corporate funds	El Paso , TX 79904	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Food and Lodging reimbursement- Leadership Latino Elect Class	
O Complete ONEY'S		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
01/27/2024	Saenz, David	
Amount (\$)	Payee address; City; State; Zip Code	
\$41.50	P.O. Box 2454	
Expenditure from		
corporate funds	Kyle, TX 78640	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
_/	Check if Austin, TX, officeholder living expense	
	Food and lodging reimbursement- Leadership Latino Elect Class	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experientare to benefit ever		
Date	Payee name	
02/07/2024	Spectrum Marketing	
Amount (\$)	Payee address; City; State; Zip Code	
\$3,673.29	95 Eddy Rd Ste 101	
Expenditure from corporate funds	Manchester, NH 03102	
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	
	Hispanic Outreach	
Complete CAU V & dia+	Candidate/Officeholder name Office sought Office held	
Complete <u>ONLY</u> if direct 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 Committee

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 12/14 Rpt: 17/19	Texas Latino Conservatives PAC	00066105
4 Date	5 Payee name	•
02/20/2024	Staples Inc.	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$64.61	1919 Taylor St.	
Expenditure from corporate funds	Houston, TX 77007	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Supplies for the Leadership Latino Elect Class training
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sor	ught Office held
experientare to benefit ever		
Date	Payee name	
01/29/2024	Starbucks	
Amount (\$)	Payee address; City; State; Zip C	ode
\$22.65	2521 Post Oak Blvd	
Expenditure from corporate funds	Houston , TX 77056	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Coffee- Leadership Latino Elect Class
		Conee- Leadership Latino Elect Class
Commission ONII V if dispose	Condidate/Officeholder name	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soil	ught Office held
•		
Date	Payee name	
02/07/2024	Targeted Victory LLC	
Amount (\$)	Payee address; City; State; Zip C	ode
\$128,984.42	2311 Wilson Blvd. Second Floor	
Expenditure from corporate funds	Arlington , VA 22201	
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.
LA LABITORL		Check if Austin, TX, officeholder living expense
		Hispanic Outreach
Complete ONLY if direct	Candidate/Officeholder name Office soil	ught Office held
expenditure to benefit C/OH		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to com	plete this form.	OTTLER (effici a category flot listed above)	
1 Total pages Schedule F1:	•		Filer ID (Ethics Commission Filers)	
Sch: 13/14 Rpt: 18/19	Texas Latino Conservatives PAC		00066105	
4 Date	5 Payee name			
02/07/2024	Traction Control LLC			
6 Amount (\$)	7 Payee address; City; State; Zip Cod	е		
\$10,000.00	405 N 115th St Suite 301			
Expenditure from corporate funds	Omaha , NE 68154			
8 PURPOSE OF	2 , (***********************************	Description		
EXPENDITURE	Consulting Expense		tside of Texas. Complete Schedule T. X, officeholder living expense	
		Hispanic Outre		
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	nt .	Office held	
expenditure to benefit C/O		ı	Office field	
Date	Payee name			
01/27/2024	Trevino, Jaime			
Amount (\$)	Payee address; City; State; Zip Cod	е		
\$70.05	P.O. Box 163			
Expenditure from corporate funds	Pleasant , TX 78064			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>b)</b> Description		
OF	Event Expense		tside of Texas. Complete Schedule T.	
EXPENDITURE		ш	X, officeholder living expense	
			ging reimbursement- Leadership	
		Latino Elect Cla	ass	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	nt	Office held	
Date	Dayee name			
01/29/2024	Payee name Valenzuela Cooper, Chelseay			
Amount (\$)	Payee address; City; State; Zip Cod	9		
\$2,000.00	6307 Birch Valley Dr.			
Expenditure from corporate funds	San Antonio, TX 78242			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel out	tside of Texas. Complete Schedule T.	
LAI LIIDITURE			X, officeholder living expense	
		Field Rep.		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	nt	Office held	
onponditure to betterit Orott				

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political ( Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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: 14/14 Rpt: 19/19	Texas Latino Conservatives PAC 00066105	
4 Date	5 Payee name	
02/15/2024	Valenzuela Cooper, Chelseay	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$282.10	6307 Birch Valley Dr.	
Expenditure from corporate funds	San Antonio, TX 78242	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Event Expense  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Food and lodging reimbursement- Leadership Latino	
	Elect Class	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
02/22/2024	Valenzuela Cooper, Chelseay	
Amount (\$)	Payee address; City; State; Zip Code	
\$75.00	6307 Birch Valley Dr.	
Expenditure from corporate funds	San Antonio, TX 78242	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
_/	Check if Austin, TX, officeholder living expense	
	Hispanic Outreach	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
01/27/2024	Vigil , Rhonda	
Amount (\$)	Payee address; City; State; Zip Code	
\$58.66	1403 North Gaetti	
,,,,,,,		
Expenditure from corporate funds	Uvalde, TX 77801	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
LAFLINDITORL	Check if Austin, TX, officeholder living expense	
	Food and lodging reimbursement- Leadership Latino Elect Class	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experiorate to belieful G/OTT		