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) 00084763 3 COMMITTEE NAME **OFFICE USE ONLY DEC PAC** Date Received **ELECTRONICALLY FILED** 03/06/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 1 E Greenway Plaza Ste 225 Change of Address Houston, TX 77046 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Chris NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Sallese CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1 E Greenway Plaza Ste 225 STREET **ADDRESS** (Residence or Business) Houston, TX 77046 **CAMPAIGN** STREET ADDRESS OR PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1 E. Greenway Plaza Ste. 225 MAILING **ADDRESS** Change of Address Houston, TX 77046 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 526-3399 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)		
DEC PAC			0008476	3		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Dan David Mayor of Manvel				
(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				
		. орровия ————————————————————————————————————				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00		
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,700.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				
	4. TOTAL POLITICA	L EXPENDITURES	\$	17,500.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	125,392.12		
OUTSTANDING LOAN TOTALS	-	AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00		
16 AFFIDAVIT	<u> </u>		<u> </u>			
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.				
		Chris	Sallese			
		Signature of Ca		surer		
AFFIX NOTAR	Y STAMP / SEAL ABOVE					
Sworn to and subscribe	d before me, by the said _	, ti	his the	day		
of	, 20, to certify	which, witness my hand and seal of office.				
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of of	ficer administering oath		

FORM MPAC **ADDENDUM**

IS COMMITTEE NAME							42 Files ID	/[-	thise Commis	oion Filoro)
2 COMMITTEE NAME							13 Filer ID	•	thics Commiss	sion Fliers)
DEC PAC							0008476			
L4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)			Tommy Hamm	ond Cha	ambers C	County Comm	nissior	ıer	
(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	ed							_
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppoi	ted					_		
		B. Oppose	ed							
	Officeholders Assisted (Identify by name or, if applicable classify by name)									
	applicable, classify by party.)	<u> </u>								
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Suppoi	ted	Jerry Mouton	Mayor of	Deer Pa	rk 			
(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	ed							
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppor	ted							
		B. Oppose	ed							
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)									
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Suppoi	ted	Justin Beckend	dorff Wa	ller Coun	ty Commissi	ioner		
(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	ed							
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppor	ted							
		B. Oppos	ed							
	Officeholders Assisted (Identify by name or, if									
	applicable, classify by party.)									

FORM MPAC **ADDENDUM**

						<u>_</u>
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
DEC PAC					0008476	3
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)			Montgomery Co	unty Commisio	oner
(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. Supporte	d			
		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.)		d Mike Hunt Ka	ufman County Co	ommissioner	
(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. Supporte	d			
		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.)		d DeWayne Bu	ns State Represe	entative	
(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. Supporte				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if					

FORM MPAC **ADDENDUM**

1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (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.)	ID (Ethics Commission Filers)
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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.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed B. Opposed COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) A. Supported Glenn Hegar Comptroller (dentify by name or, if applicable, classify by party.) B. Opposed B. Opposed A. Supported Glenn Hegar Comptroller (dentify by name or, if applicable, classify by party.) B. Opposed B. Opposed 3. Officeholders A. Supported Glenn Hegar Comptroller (dentify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (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.)	84763
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.) 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.) B. Opposed	
(Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders	
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 Assisted (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed B. Opposed B. Opposed	
Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) (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 A. Supported 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.) 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported B. Opposed A. Supported 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
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.)	
(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.)	
3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	
Assisted (Identify by name or, if applicable, classify by party.)	
COMMITTEE A CONTRACT OF THE CO	
COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported Rex Lingberg Mayor of Pasadena	
(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 MPAC

						ADDENDUM
						Page 6 of 12
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
DEC PAC					00084763	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Kendric Jones	Waller County C	ommissioner	
(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.)		Debbie Gonzal	es Ingalsbe Hay	s County Comn	nissioner
(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.)					

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

		7 of 12
17 COMMITTEE NAME DEC PAC	18 Filer ID 00084763	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,700.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR L. ORGANIZATION	ABOR	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORP LABOR ORGANIZATION	ORATION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR C	DRGANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	BOR	\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	OR ORGANIZATION	\$
9. SCHEDULE E: LOANS		\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUT	IONS	\$ 17,500.00
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIB	BUTIONS	\$
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIB	UTIONS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIO TO FILER	NS RETURNED	\$

MONET	ARY POLITICAL CONTRIBUTION	NS	SCHEDULE A1
The Instru	ction Guide explains how to complete this fo	1 Total pages Schedule A1: Sch: 1/1 Rpt: 8/12	
2 FILER NAME DEC PAC			3 Filer ID (Ethics Commission Filers) 00084763
4 Date 01/31/2024	 Full name of contributor)	7 Amount of Contribution (\$) \$850.00
	Houston, TX 77095	Employer (See Instructions	
8 Principal occu President	upation / Job title (See Instructions)	s) ing	
Date 02/16/2024	Full name of contributor		Amount of Contribution (\$) \$850.00
	Houston, TX 77095		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions Dannenbaum Engineeri	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 1/4 Rpt: 9/12	2 FILER NAME DEC PAC 3 Filer ID (Ethics Commission Filers) 00084763
4 Date 02/05/2024	5 Payee name Cole Hefner Campaign
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 167
Expenditure from corporate funds	Mount Pleasant, TX 75456
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date 02/05/2024	Payee name Dan Davis Campaign
Amount (\$) \$500.00	Payee address; City; State; Zip Code 10011 Meadowglen Lane
Expenditure from corporate funds	Houston, TX 77042
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date 02/05/2024	Payee name DeWayne Burns For State Representative
Amount (\$) \$500.00	Payee address; City; State; Zip Code 703 Sontelake Dr
Expenditure from corporate funds	Cleburne, TX 76033
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Contribution
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

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/Political Committee
Credit Contributions

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 Out of District
OTHER (enter a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7	
1 Total pages Schedule F1: Sch: 2/4 Rpt: 10/12	2 FILER NAME DEC PAC 3 Filer ID (Ethics Commission Filers) 00084763
4 Date	5 Payee name
02/05/2024	Debbie Gonzales Ingalsbe Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	4909 S Old Bastrop Hwy
Expenditure from corporate funds	San Marcos, TX 78666
8 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
	Political Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/05/2024	Glenn Hegar Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	PO Box 1008
φ5,000.00	PO BOX 1006
Expenditure from	
corporate funds	Katy, TX 77492
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 Check if Austin, TX, officeholder living expense
	Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/05/2024	
02/03/2024	James Noack Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	2 Dancing Breeze Pl
Expenditure from corporate funds	The Woodlands, TX 77382
-	1
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
	Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Git/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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1. Total pages Calculula Ed	
1 Total pages Schedule F1:	
Sch: 3/4 Rpt: 11/12	DEC PAC 00084763
4 Date	5 Payee name
02/05/2024	Jerry Mouton Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	PO Box 75190
Expenditure from	Houston, TX 77234
corporate funds	1
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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Political Contribution
	- Sillion Softmandi
Complete CNII V if direct	Candidate/Officeholder name Office cought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/05/2024	Justin Beckendorff Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	3506 Pitts Rd
Expenditure from corporate funds	Katy, TX 77493
·	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
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
	Political Contribution
	. 3.11.33.13.1
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	· ·
Date	Payee name
02/05/2024	Keep Hunt Commissioner
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 1422
Expenditure from corporate funds	Terrell, TX 75160
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
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
	Political Contribution
	Totaloa Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
,	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Se		•	Sala		ges	/Contract Labor		Travel Out o		trict category not listed above	e)
		_		The In	struction Gu	iide explaii	ns how	to com	ple	ete this form.					
1	Total pages Schedule F1:	2	FILER NAME								3	Filer ID		(Ethics Commission	Filers)
	Sch: 4/4 Rpt: 12/12		DEC PAC									0008476	3		
4	Date	5	Payee name												
	02/15/2024		Kendric Jon	es Ca	ımpaign										
6	Amount (\$)	7	Payee addres	s;	City;	Sta	te; Zij	Cod	e						
	\$1,000.00		PO Box 218	0											
	T Expenditure from														
<u>_</u>	corporate funds	_	Prarie View,					1.							
8	PURPOSE OF	(a)	Category (Se				schedule)	· [0	b)	Description		:d4 T	^	oloto Colo della T	
	EXPENDITURE		Contribution Candidate/C				mitta			Check if travel				plete Schedule T.	
			Carididate/C	micei	ioiuei/Foiii	licai Con	mmuee	, l		Political Cont			9	олронов	
_	Complete ONLY if direct	<u> </u>	Candidata/Offic	obold	or nome		Office		hŧ			Office	. h.c	J.d.	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	enoia	er name		Опісе	sougl	nt			Office	e ne	eia	
	Date		Payee name												
	02/15/2024		Rex Lindber	g Car	mpaign										
	Amount (\$)	\vdash	Payee addres	s.	City;	Sta	te; Zi	n Cod	<u> </u>						
	\$1,000.00		6503 Saint J	•	•	Old	,	. Oou	•						
	Ψ1,000.00		0303 Saint o	iuuc i	J1										
	Expenditure from corporate funds		Pasadena, 1	TX 77	505										
	PURPOSE	(a)	Category (Se	e Categ	ories listed at th	ne top of this	schedule)	(b)	Description					
	OF EXPENDITURE		Contribution							Check if travel	outs	ide of Texas.	Com	olete Schedule T.	
	EXI ENDITORE		Candidate/C	Office	nolder/Polit	tical Con	mittee	•		Check if Austin			iving	expense	
										Political Cont	trib	ution			
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ehold	er name		Office	sougl	ht			Office	e he	eld	
	Date		Payee name												
	02/05/2024		Tommy Han	nmon	d Campaid	n									
	Amount (\$)		Payee addres		City;		te; Zi	2 Cod	_						
	` '				City,	Sia	ite, Zij	J Cou	C						
	\$1,500.00		303 Daisy La	ane											
	Expenditure from corporate funds		Baytown, TX	(775:	23										
	PURPOSE	(a)	Category (Se	e Caten	ories listed at th	ne ton of this	schedule)	(b)	Description					
	OF	``	Contribution	-			501104410,			`	outs	ide of Texas.	Comp	plete Schedule T.	
	EXPENDITURE		Candidate/C				mittee	,		Check if Austin	ı, TX	, officeholder l	iving	expense	
										Political Cont	trib	ution			
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ehold	er name		Office	sougl	ht			Office	e he	eld	
	experialitate to beliefft C/Of	_													
_				_				· <u> </u>							