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) 00069233 3 COMMITTEE NAME **OFFICE USE ONLY** Hochheim Prairie Political Action Committee Date Received **ELECTRONICALLY FILED** 03/27/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 500 U.S. Hwy. 77A S. Change of Address Yoakum, TX 77995-1399 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Mr. David T. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Weber CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER 500 U.S. Hwy 77A S. STREET **ADDRESS** (Residence or Business) Yoakum, TX 77995-1399 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 500 U.S. Hwy 77A South MAILING **ADDRESS** Change of Address Yoakum, TX 77995-1399 AREA CODE **CAMPAIGN** PHONE NUMBER **EXTENSION TREASURER PHONE** (361) 293-1021 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 X April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 02/26/2024 03/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Hochheim Prairie Politic	cal Action Committee			00069233	3
4 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 Managuras	A. Supported			
	Measures (Describe by date and location	A. Supported			
	of election and nature of issue.)				
		B. Opposed			
	3. Officeholders				
	Assisted (Identify by name or, if applicable, classify by party.)				
E CONTRIBUTION	1	DOLUTICAL CONTRIR	LITIONS (OTLIED THAN	1	
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANTEES OF IADE ELECTRONICALL qualifies for the higher item	.Y)	\$	0.00
	2. TOTAL POLITICA	-		\$	700.00
	(OTHER THAN PLEI	OGES, LOANS, OR GU	ARANTEES OF LOANS)		766.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	1,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING		ITAINED AS OF THE LAST	DAY \$	19,202.06
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTS REPORTING PERIOD	STANDING LOANS AS OF 1	THE \$	0.00
6 AFFIDAVIT	I				
		true and	or affirm, under penalty of pe correct and includes all inform e 15, Election Code.	rjury, that the mation require	accompanying report is ed to be reported by me
			Mr. David	l T. Weber	
			Signature of Car	mpaign Treas	urer
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	before me, by the said		, tł	nis the	day
	_, 20, to certify \				
Signature of officer ad	ministering oath	Printed name of officer	administering oath	Title of off	icer administering oath

SUBTOTALS - MPAC

FORM MPAC **COVER SHEET PG 3**

				3 01 12
17 COMM	TEE NAME	18 Filer ID	(Ethic	s Commission Filers)
Hochh	im Prairie Political Action Committee	00069233		
	JLE SUBTOTALS OF SCHEDULE		5	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	766.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	0.00
10.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	1,000.00
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL CONTRIBU	JIION	15		SCHEDULE	A1
	The Instru	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 1/6 Rpt: 4/12	
2	FILER NAME Hochheim P	rairie Political Action Committee			3	Filer ID (Ethics Commission 00069233	ı Filers)
4	Date 03/07/2024	 5 Full name of contributor out-of-state PA Brewer, Lynn 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$90.00
		Yoakum, TX 77995					
8	Vice Preside		9	Employer (See Instructions Hochheim Prairie Insura			
	Date 03/21/2024	Full name of contributor out-of-state PA Brewer, Lynn Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$90.00
	Deinsinal assu	Yoakum, TX 77995		Employer (See Instructions	<u></u>		
	Principal occupation / Job title (See Instructions) Employer (See Instru Vice President Hochheim Prairie II					e	
	Date 03/07/2024	Full name of contributor out-of-state PA Bridges, Jimmy Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$25.00
		Lubbock, TX 79424					
	•	pation / Job title (See Instructions) epresentative		Employer (See Instructions Hochheim Prairie Insura		e	
	Date 03/21/2024	Full name of contributor out-of-state PA Bridges, Jimmy Contributor address; City; State; Zip Code Lubbock, TX 79424)		Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions) epresentative		Employer (See Instructions Hochheim Prairie Insura		e	
	Date 03/07/2024	Full name of contributor out-of-state PAC Caldwell, Matthew (Mr.) Contributor address; City; State; Zip Code Chriesman, TX 77838)		Amount of Contribution (\$)	\$5.00
		pation / Job title (See Instructions)		Employer (See Instructions		0	
	Claims Repr	ESCHIQUVE		Hochheim Prairie Insura	u IC	<u> </u>	

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDULE	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/12	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Hochheim P	rairie Political Action Committe	e			00069233	
4	Date 03/21/2024	5 Full name of contributor [Caldwell, Matthew (Mr.) 6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5.00
		Chriesman, TX 77838					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	<u></u>		
	Claims Repr	esentative		Hochheim Prairie Insura	เทต	е	
_	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	03/07/2024	Gearson, Tracey Contributor address; City; Sta				,	\$10.00
		Yoakum, TX 77995					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u></u>		
	Underwriter Hochheim Prairie Ir					е	
	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	03/21/2024	Gearson, Tracey	-			`,	\$10.00
		Contributor address; City; Sta Yoakum, TX 77995	ıte; Zip Code				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u></u>		
	Underwriter			Hochheim Prairie Insura	ınc	e	
	Date 03/07/2024	Full name of contributor Gloor, Carol Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Senior Mark	eting Coordinator		Hochheim Prairie Insura	ınc	e	
	Date 03/21/2024	Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	5	Shiner, TX 77984			Ĺ		
		pation / Job title (See Instructions) eting Coordinator		Employer (See Instructions Hochheim Prairie Insura		e	

	MONEI	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this form	n.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/12	
2	FILER NAME	voirio Dolitical Action Committee	_		3	Filer ID (Ethics Commission	Filers)
		rairie Political Action Committee	_		L	00069233	
4	Date 03/07/2024	5 Full name of contributor Jank, Mitchell 6 Contributor address; City; Star	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Meyersville, TX 77974 pation / Job title (See Instructions)	9	Employer (See Instructions			
°	Underwriter	pation / Job title (See instructions)	9	Hochheim Prairie Insura		0	
	Onderwiner			Hochileiiii Fraille Ilisura	uic		
	Date 03/21/2024	Full name of contributor [Jank, Mitchell Contributor address; City; Star	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
		Meyersville, TX 77974					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Underwriter			Hochheim Prairie Insura	ınc	e	
	Date 03/07/2024	Full name of contributor [Knezek, Kathy Contributor address; City; State	out-of-state PAC (ID#:te; Zip Code			Amount of Contribution (\$)	\$10.00
		Yoakum, TX 77995					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>L</u>		
	Financial Ac			Hochheim Prairie Insura		e	
_	Date	Full name of contributor	out-of-state PAC (ID#:	`	Г	Amount of Contribution (\$)	
	03/21/2024	Contributor address; City; Star Yoakum, TX 77995				Amount of Contribution (4)	\$10.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u></u> ;)		
	Financial Ac	countant		Hochheim Prairie Insura		e	
	Date 03/07/2024	Full name of contributor Miculka, Eric (Mr.)	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
		Contributor address; City; Sta Yoakum, TX 77995	te, Zıµ Cude				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Insurance Da	ata Analyst		Hochheim Prairie Insura	เทต	e	
			,				

	MONEI	ARY POLITICAL C	ONTRIBUTION	15		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 4/6 Rpt: 7/12	
2	FILER NAME	undinin Delitical Antique Community	_		3	Filer ID (Ethics Commission	n Filers)
		rairie Political Action Committe				00069233	
4	Date 03/21/2024	Full name of contributor Miculka, Eric (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10.00
		Yoakum, TX 77995	-				
8		pation / Job title (See Instructions)	9	1 7 (
	Insurance D	ata Analyst ————————————————————————————————————		Hochheim Prairie Insura	ınc	e 	
	Date 03/07/2024	Full name of contributor Ressler, Shelley Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$5.00
		Yoakum, TX 77995					
		pation / Job title (See Instructions)		Employer (See Instructions			
	Marketing Coordinator Hochheim Prairie In					е	
	Date 03/21/2024	Full name of contributor Ressler, Shelley Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$5.00
		Yoakum, TX 77995					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Marketing Co	oordinator		Hochheim Prairie Insura	เทต	е	
	Date 03/07/2024	Full name of contributor Schmidt, Linda (Ms.) Contributor address; City; Sta Yoakum, TX 77995	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$150.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Hochheim Prairie Insura		е	
	Date 03/21/2024	Full name of contributor Schmidt, Linda (Ms.) Contributor address; City; Sta Yoakum, TX 77995	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$150.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Hochheim Prairie Insura		e	
			L_				

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 5/6 Rpt: 8/12	
2	FILER NAME Hochheim P	rairie Political Action Committe	ee		3	Filer ID (Ethics Commission 00069233	Filers)
4	Date 03/07/2024	5 Full name of contributor Staton, Carrie6 Contributor address; City; States	out-of-state PAC (ID#:atte; Zip Code)	7	Amount of Contribution (\$)	\$10.00
Ļ	Deire size al. a a a co	Lockhart, TX 78644	la la				
8		pation / Job title (See Instructions) epresentative	9	Employer (See Instructions Hochheim Prairie Insura		e	
	Date 03/21/2024	Full name of contributor Staton, Carrie Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
		Lockhart, TX 78644					
	Principal occupation / Job title (See Instructions) Marketing Representative Employer (See Inst Hochheim Prairie					e	
	Date 03/07/2024	Full name of contributor Stewart, Donna Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$10.00
		Edna, TX 77957					
	Principal occu Claim Repre	pation / Job title (See Instructions) sentative		Employer (See Instructions Hochheim Prairie Insura		e	
	Date 03/21/2024	Full name of contributor Stewart, Donna Contributor address; City; Sta Edna, TX 77957	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu Claim Repre	pation / Job title (See Instructions)		Employer (See Instructions Hochheim Prairie Insura		e	
	Date 03/07/2024	Full name of contributor Tate, Barry Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$3.00
	Principal occu Claim Repre	pation / Job title (See Instructions) sentative		Employer (See Instructions Hochheim Prairie Insura		e	

	MONEI	ARY POLITICAL CO	ONTRIBUTION	15		SCHEDULE	A1
	The Instru	ction Guide explains how t	o complete this for	m.	1	Total pages Schedule A1: Sch: 6/6 Rpt: 9/12	
2	FILER NAME	rairie Political Action Committee			3	Filer ID (Ethics Commission 00069233	Filers)
_			_		<u> </u>		
4	Date 03/21/2024	5 Full name of contributorTate, Barry6 Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code		7	Amount of Contribution (\$)	\$3.00
		Iowa Park, TX 76367					
8		pation / Job title (See Instructions)	9	Employer (See Instructions			
	Claim Repre	sentative		Hochheim Prairie Insura	ance		
	Date 03/07/2024	Full name of contributor Taylor, Kim Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$25.00
		Yoakum, TX 77995					
		Principal occupation / Job title (See Instructions) Employer (See Instructions) Hochheim Prairie In					
	Manager			Hochheim Prairie Insura	ance		
	Date 03/21/2024)		Amount of Contribution (\$)	\$25.00
		Yoakum, TX 77995					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	?) 		
	Manager	pation 7 000 title (Oce motractions)		Hochheim Prairie Insura	•	a	
			<u> </u>		T		
	Date 03/07/2024	Full name of contributor Wilson, Christopher Contributor address; City; State Yoakum, TX 77995	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu Underwriter	pation / Job title (See Instructions)		Employer (See Instructions Hochheim Prairie Insura		2	
	Date 03/21/2024	Full name of contributor Wilson, Christopher Contributor address; City; State Yoakum, TX 77995	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Underwriter			Hochheim Prairie Insura	ance	9	
			1				

PLEI	DGED CONTRIBU	TIONS		SCHEDULE	В
Т	he Instruction Guide exp	plains how to com	plete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 10/12	
2 FILER N	AME im Prairie Political Action Cor	nmittee		3 Filer ID (Ethics Commission Filers) 00069233	
<u></u>	OF UNITEMIZED PLEDO			\$	0.00
5 Date	6 Full name of pledgor 7 Pledgor Address;	out-of-state PAC City; State; Zip C		8 Amount of pledge (\$) 9 In-kind description (If applicable)	
				Check if travel outside of Texas. Complete Sc	hedule -
10 Principal	occupation / Job title (See Instru	ictions)	11 Employer (See In	nstructions)	

	LOANS					SCHEDULI	ΕE		
	The Instructio	on Guide explains how	to complete this f	orm.	1 Total pages Schedule E: Sch: 1/1 Rpt: 11/12				
	FILER NAME Hochheim Prairi	e Political Action Committ	ee		3 Filer ID (Ethics Commission Filers) 00069233				
4 .	TOTAL OF UN	IITEMIZED LOANS			l	\$	0.00		
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:)	9 Loan Amount (\$)			
1	Is lender a financial institution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate			
						11 Maturity Date			
12	Principal occupation	on / Job title (See Instructions	s)	13 Employer (See Instructions	5)				
14 [Description of Coll None	ateral		15 Check if personal funds we	ere deposited	d into political account (See Instructions)			
	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed	d (\$)		
[not applicable	18 Guarantor address;	City; State;	Zip Code					
20	Principal occupation	on		21 Employer (See Instructions	s)	1			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Sen	vices			Vages	/Contract Labor		OTHER (enter a	category not list	ed above)
_		_								_			
1	Total pages Schedule F1: Sch: 1/1 Rpt: 12/12	2	FILER NAME Hochheim P		Political A	ction Con	nmittee			3	Filer ID 00069233	(Ethics Com	mission Filers)
4	Date	5	Payee name							_			
	03/07/2024	Ľ	Robert Nich	ols for	Texas S	enate							
6	Amount (\$) \$1,000.00	7	Payee address P.O. Box 23		City;	Stat	e; Zip Co	ode					
	Expenditure from												
Ļ	corporate funds	(0)	Jacksonville					(h)	- · · ·				
8	PURPOSE OF	(a)	Category (Se				chedule)	(a)	Description				
	EXPENDITURE		Contribution						—		de of Texas. Com		
			Candidate/C	micenc	olaer/Poli	ticai Com	mittee		_		officeholder living	j expense	
									Campaign Co	OHL	ibulion		
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ceholde	r name		Office sou	ıght			Office he	eld	