MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

Τł	The MPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00083406 2 Total pages filed: 7						
3	COMMITTEE NAME	OFFICE USE ONLY					
	H-E-B Political Acti	on Committee					
		Date Received ELECTRONICALLY FILED 04/02/2024					
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP				
	ADDRESS	646 South Flores Street					
	Change of Address	San Antonio, TX 78204		Date Hand delivered as Date Destroyed			
5	CAMPAIGN	MS/MRS/MR FIRST	MI	Date Hand-delivered or Date Postmarked			
ľ	TREASURER		IVII	Receipt # Amount			
	NAME	Ms. Megan		Receipt # Amount			
				Date Processed			
		NICKNAME LAST	SUE	FIX			
		Rooney		Date Imaged			
		Rooney		Date mayeu			
F	CAMPAICN						
6	CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE)	APT / SUITE #; CITY;	STATE; ZIP CODE			
	STREET	646 S Flores St					
	(Residence or Business)	San Antonio, TX 78204					
7	CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY;	STATE; ZIP CODE			
	TREASURER	646 S Flores St		,			
	MAILING ADDRESS						
		San Antonio, TX 78204					
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION				
	TREASURER PHONE	(210) 938-8000					
	THOME	(210) 350-0000					
9	REPORT TYPE		10th day after campaign				
		X Monthly	treasurer termination	Dissolution (Attach PAC-DR)			
10) MONTHLY						
	REPORT FILING	January 5 X Apri	5 July 5	October 5			
	DEADLINE	February 5 May	5 August 5	November 5			
		March 5 June	e 5 September 5	5 December 5			
11	L PERIOD	Month Day Year	Mor	nth Day Year			
	COVERED	02/26/2024	THROUGH 03/	25/2024			
⊢		1					
1							
1							
		GO	TO PAGE 2				
Fo	rms provided by Tex	as Ethics Commission www.e	thics.state.tx.us	Version V3.5.1.5b35d027			

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID	(Ethics Commission Filers)				
H-E-B Political Action C	000834	106				
14 COMMITTEE ACTIVITY	1. 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.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00		
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	5,540.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00		
	4. TOTAL POLITICA	L EXPENDITURES	\$	342.50		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	1,402,014.93		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00		
16 AFFIDAVIT			•			
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.				
		Ms. Meg	an Roone	y		
		Signature of Ca				
AFFIX NOTARY	AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed	before me, by the said	, t	his the	day		
of	of, 20, to certify which, witness my hand and seal of office.					
Signature of officer ad	ninistering oath	Printed name of officer administering oath	Title of	officer administering oath		
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V3.5.1.5b35d027		

FORM MPAC COVER SHEET PG 3

3	of	7	

17 COMMI ⁻ H-F-B F	(Ethics Commission Filers)						
H-E-B Political Action Committee 00083406 19 SCHEDULE SUBTOTALS							
NAME C	SUBTOTAL AMOUNT						
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,000.00					
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 CORPORA LABOR ORGANIZATION	TION OR	\$				
6. X	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$ 365.00				
7. X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$ 175.00				
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O	\$					
9.	SCHEDULE E: LOANS	\$					
10.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$					
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 342.50				
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
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 F TO FILER	\$					

SUBTOTALS - MPAC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

	The Instru	ction Guide explains how to complete this fo	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/7			
2	2 FILER NAME				Filer ID (Ethics Commissio	on Filers)
[H-E-B Political Action Committee				00083406	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/04/2024	Avalos, Javier				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		San Antonio, TX 78204				
8	Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructions	5)		
	Senior VP					
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/18/2024	Harris, Mayerland)			\$1,000.00
	03/10/2024					Ψ1,000.00
		Contributor address; City; State; Zip Code				
		San Antonio, TX 78204				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Group VP					
╞	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/06/2024 Jarzombek, Michael				,	\$2,000.00
						Ψ2,000.00
	Contributor address; City; State; Zip Code					
		San Antonio, TX 78204				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Senior VP					
	Date	Full name of contributor 🛛 out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/13/2024	Taylor, Darrell Scott				\$1,000.00
		Contributor address; City; State; Zip Code				
		San Antonio, TX 78204				
⊢	Dringing					
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Group VP					

MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

	The Instruction Guide explains how to complete this form.			1	Total pages Sch: 1/1 Rp	Schedule C3: t: 5/7	
2	FILER NAME			3	Filer ID	(Ethics Commission Filers)	
	H-E-B Political Action Committee				00083406		
4	Date	5	Corporation / Labor Organization name	6	Amount (\$)		
	03/01/2024		H-E-B, LP			36	5.00

NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C4

	The Instruction Guide explains how to complete this form.			1 Total pages Schedule C4: Sch: 1/1 Rpt: 6/7				
2	FILER NAME		3	Filer ID	(Ethics Commission Filers)			
	H-E-B Political Action Committee				00083406			
4	Date	5	Corporation / Labor Organization name	6	Amount (\$)			
	03/25/2024		H-E-B, LP				175.00	

UNPAID INCU	SCHEDULE F2	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	EXPENDITURE CATEGORIES FOR BOX 10(a) Event Expense Fees Food/Beverage Expense C- Committee Eugal Services Expense Food/Beverage Expense Eugal Services Eugal Services Expense Forthing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F2: Sch: 1/1 Rpt: 7/7	3 Filer ID (Ethics Commission Filers) 00083406	
⁴ TOTAL OF UNITEMI	ZED UNPAID INCURRED OBLIGATIONS	\$
5 Date 03/25/2024	6 Payee name Atchley & Associates LLP	
7 Amount (\$) \$342.50	8 Payee address; City; State; Zip Code 1005 La Posada Dr	
Expenditure from corporate funds 9 TYPE OF	Austin, TX 78752-3815	
EXPENDITURE	X Political Non-Political	
10 PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense ng and reporting services
11 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held