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** 04/29/2024 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 APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); 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 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 X May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 03/26/2024 04/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME				13 Filer ID) (Ethics Commission Filers)
Hochheim Prairie Politi	cal Action Committee			000692	
4 COMMITTEE	1. Candidates	A. Supported		1	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2 Magguras	A. Supported			
	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.)				
.5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIE OR GUARANTEES OF IADE ELECTRONICAL qualifies for the higher iter	LY)	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI		S JARANTEES OF LOANS)	\$	766.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPEND	ITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	2,250.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN		NTAINED AS OF THE LAST	T DAY \$	17,718.06
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUT REPORTING PERIOD	STANDING LOANS AS OF	THE \$	0.00
6 AFFIDAVIT					
		true and	or affirm, under penalty of p correct and includes all info tle 15, Election Code.		
			Mr. Dav	id T. Webe	er
			Signature of Ca		
AFFIX NOTARY	' STAMP / SEAL ABOVE				
Sworn to and subscribed	I before me, by the said			this the	day
	_, 20, to certify v				
Signature of officer ac	Iministering oath	Printed name of officer	r administering oath	Title of	officer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3 3 of 12

		EE NAME Prairie Political Action Committee	18 Filer ID 00069233	(Eth	nics Commission Filers)			
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE SUBTOTA								
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	766.00			
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00			
3.	X	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 CORPORALABOR 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.	Х	SCHEDULE E: LOANS		\$	0.00			
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	2,250.00			
11.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00			
12.	X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00			
13.	Х	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		SCHEDULI	A1
	The Instru	ction Guide explains how to complete t	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 04/04/2024	4/2024 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 04/18/2024	Full name of contributor out-of-state PAG Brewer, Lynn Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$90.00
	Dringing aggr	Yoakum, TX 77995		Employer (Coo Instructions	<u></u>		
	Vice Preside	pation / Job title (See Instructions) ent		Employer (See Instructions Hochheim Prairie Insura		e	
	Date 04/04/2024	Full name of contributor out-of-state PAG 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 04/18/2024	Full name of contributor out-of-state PAG 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 04/04/2024	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			
	Claims Repr	esenialive		Hochheim Prairie Insura	u1C	e	

	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: 2/6 Rpt: 5/12	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Hochheim P	rairie Political Action Committe	e 			00069233	
4	Date 04/18/2024	5 Full name of contributor [Caldwell, Matthew (Mr.) 6 Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)	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	เทင	е	
	Date 04/04/2024	Full name of contributor [Gearson, Tracey Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
		Yoakum, TX 77995					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Underwriter			Hochheim Prairie Insura	เทต	e	
	Date 04/18/2024	Full name of contributor [Gearson, Tracey Contributor address; City; Sta	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	5)		
	Underwriter			Hochheim Prairie Insura	เทต	e	
	Date 04/04/2024	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	เทต	e	
	Date 04/18/2024	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)		
		eting Coordinator		Hochheim Prairie Insura		e	

	MONEI	ARY POLITICAL CO	NIRIBUTION	S		SCHEDULE	A1
	The Instru	ction Guide explains how to	complete this forr	m.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/12	
2	FILER NAME	rairie Political Action Committee			3	Filer ID (Ethics Commission 00069233	Filers)
_					_		
4	Date 04/04/2024	5 Full name of contributorJank, Mitchell6 Contributor address; City; State	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5.00
		Meyersville, TX 77974	· '				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Underwriter			Hochheim Prairie Insura		e	
_	Data	Full name of contributor	and of otata DAC (ID)	`	Г	Amount of Contribution (\$)	
	Date	_	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	04/18/2024	Jank, Mitchell					Φ5.00
		Contributor address; City; State	; Zip Code				
		Moveroville, TV 77074					
		Meyersville, TX 77974	1		Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions		_	
	Underwriter			Hochheim Prairie Insura	เทต	e 	
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	04/04/2024	Knezek, Kathy					\$10.00
		Contributor address; City; State	; Zip Code		1		
		Yoakum, TX 77995					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Financial Ac	countant		Hochheim Prairie Insura	ınc	e	
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	04/18/2024	Knezek, Kathy					\$10.00
		Contributor address; City; State	 : Zip Code				
			•				
		Yoakum, TX 77995					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Financial Ac	countant		Hochheim Prairie Insura	เทต	е	
_	Date	Full name of contributor	out-of-state PAC (ID#:	1	Г	Amount of Contribution (\$)	
	04/04/2024	Miculka, Eric (Mr.)	out-of-state FAC (ID#			Amount of Contribution (4)	\$10.00
	04/04/2024		. 7'- 0-d-				Ψ10.00
		Contributor address; City; State	; ZIP Code				
		Yoakum, TX 77995					
<u> </u>	Dringing!		1	Employer (See Instructions	· /		
		pation / Job title (See Instructions)		Employer (See Instructions Hochheim Prairie Insura		9	
	Insurance D	ala Allaiysi		HOGHIEHH PLANE HISUFA	u IC		

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		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 Hochheim P	rairie Political Action Committe	ee		3	Filer ID (Ethics Commission 00069233	n Filers)
4	Date 04/18/2024	18/2024 Miculka, Eric (Mr.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$10.00	
		Yoakum, TX 77995					
8	Insurance D			Employer (See Instructions Hochheim Prairie Insura			
	Date 04/04/2024	Full name of contributor Ressler, Shelley Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$5.00
	Dringinal occu	Yoakum, TX 77995 pation / Job title (See Instructions)		Employer (See Instructions			
	Marketing Co		'	Hochheim Prairie Insura		e	
	Date 04/18/2024	Full name of contributor Ressler, Shelley Contributor address; City; Sta	out-of-state PAC (ID#:atte; Zip Code)		Amount of Contribution (\$)	\$5.00
		Yoakum, TX 77995					
	Principal occu Marketing C	pation / Job title (See Instructions) oordinator		Employer (See Instructions Hochheim Prairie Insura		е	
	Date 04/04/2024	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 04/18/2024	Full name of contributor Schmidt, Linda (Ms.) Contributor address; City; Sta	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	

	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 04/04/2024	5 Full name of contributor Staton, Carrie6 Contributor address; City; State	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10.00
		Lockhart, TX 78644					
8	Marketing R	pation / Job title (See Instructions) epresentative		Employer (See Instructions Hochheim Prairie Insura			
	Date 04/18/2024	Full name of contributor Staton, Carrie Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Deire die alle acces	Lockhart, TX 78644			Ĺ		
		pation / Job title (See Instructions) epresentative)	Employer (See Instructions Hochheim Prairie Insura		e	
	Date 04/04/2024	Full name of contributor Stewart, Donna Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
		Edna, TX 77957					
	Principal occu Claim Repre	pation / Job title (See Instructions sentative		Employer (See Instructions Hochheim Prairie Insura		е	
	Date 04/18/2024	Full name of contributor Stewart, Donna Contributor address; City; St. 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 04/04/2024	Full name of contributor Tate, Barry Contributor address; City; St. Iowa Park, TX 76367	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		е	

	MONET	ARY POLITICAL CONTRIBU	JTION	IS		SCHEDULI	■ A1
	The Instruc	ction Guide explains how to complete	this for	n.	1	Total pages Schedule A1: Sch: 6/6 Rpt: 9/12	
2	FILER NAME Hochheim Pi	rairie Political Action Committee			3	Filer ID (Ethics Commission 00069233	Filers)
4	Date 04/18/2024	 5 Full name of contributor out-of-state PAG Tate, Barry 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$3.00
_	Deinsinal assu	Iowa Park, TX 76367	lo.	Franksian (Cook batwatian	_		
8	Claim Repre	pation / Job title (See Instructions) sentative	9	Employer (See Instructions Hochheim Prairie Insura		e	
	Date 04/04/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu	yoakum, TX 77995 pation / Job title (See Instructions)		Employer (See Instructions	 s)		
Manager Hochheim Prairie Insura		anc	е				
	Date 04/18/2024	Full name of contributor out-of-state PAG Taylor, Kim Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$25.00
		Yoakum, TX 77995					
	Principal occu Manager	pation / Job title (See Instructions)		Employer (See Instructions Hochheim Prairie Insura		e	
	Date 04/04/2024	Full name of contributor out-of-state PAG Wilson, Christopher Contributor address; City; State; Zip Code Yoakum, TX 77995)	•	Amount of Contribution (\$)	\$5.00
	Principal occu Underwriter	pation / Job title (See Instructions)		Employer (See Instructions Hochheim Prairie Insura		е	
	Date 04/18/2024	Full name of contributor out-of-state PAG Wilson, Christopher Contributor address; City; State; Zip Code Yoakum, TX 77995)	•	Amount of Contribution (\$)	\$5.00
	Principal occu Underwriter	pation / Job title (See Instructions)		Employer (See Instructions Hochheim Prairie Insura		e	
			I				

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	iges Schedule E: 1 Rpt: 11/12	
	FILER NAME Hochheim Prairi	e Political Action Committ	ee		3 Filer ID 000692	(Ethics Commission Fi	lers)
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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHEP (expense 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: 1/1 Rpt: 12/12	Hochheim Prairie Political Action Committee 00069233
4 Date	5 Payee name
04/10/2024	Lois W. Kolkhorst Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	P.O. Box 2546
Expenditure from corporate funds	Brenham, TX 77834
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
	campaign contribution
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/17/2024	Texans for Dade
Amount (\$)	Payee address; City; State; Zip Code
\$750.00	P.O. Box 848
Expenditure from corporate funds	Nederland, TX 77627
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete ONLY if direct expenditure to benefit C/O	