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) 00066192 3 COMMITTEE NAME **OFFICE USE ONLY** Bartlett Cocke General Contractors Political Action Committee Date Received **ELECTRONICALLY FILED** 05/01/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 8706 Lockway Change of Address San Antonio, TX 78217 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Kirk D. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Kistner CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE TREASURER 8706 Lockway STREET **ADDRESS** (Residence or Business) San Antonio, TX 78217 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 8706 Lockway MAILING **ADDRESS** Change of Address San Antonio, TX 78217 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (210) 655-1031 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 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 03/26/2024 04/25/2024

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

Bartlett Cocke General Contractors Political Action Committee 00006192 La COMMITTEE ACTIVITY La Condidates A. Supported	2 COMMITTEE NAME			13 F	iler ID	(Ethics Commission Filers)
ACTIVITY (Attach lass on plain paper to complete the import if excessively) 2. Measures (Describe by date and focation of election and focation and election of election and ele		Contractors Political Ad	tion Committee			,
Attach lots on plain applicable, classify by party. Attach lots on plain paper to complete the report if necessary.)	4 COMMITTEE	1. Candidates	A. Supported	ı		
2. Measures (Describe by date and location of election and nature of issue) 8. Opposed 3. Officeholiders Assisted (Describe by date and location of election and nature of issue) 8. Opposed 5. CONTRIBUTION TOTALS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) (CONTRIBUTION) 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 8. CONTRIBUTION (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 8. CONTRIBUTION (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 8. CONTRIBUTION ATTAL POLITICAL EXPENDITURES 9. CONTRIBUTION ATTAL POLITICAL EXPENDITURES 9. CONTRIBUTION ATTAL POLITICAL EXPENDITURES 9. CONTRIBUTION BALANCE 1. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD 9. 8. CONTRIBUTION BALANCE 1. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD 1. Swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code. 1. Mr. Kirk D. Kistner 1. Signature of Campaign Treasurer	ACTIVITY					
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Signature of Campaign Treasurer			true and correct an	d includes all informatio		
				Mr. Kirk D. K	istner	
AFFIX NOTARY STAMP / SEAL ABOVE				Signature of Campai	gn Treasui	rer
	AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed before me, by the said, this the day	Sworn to and subscribed	hefore me by the said		this th	ne	dav
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 officer administering oath	Signature of officer ad	ministering oath	Printed name of officer administer	ring oath	itle of offic	er administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3 3 of 5

					3 of 5
17 COMMITTEE NAME 18 Filer ID (sion Filers)
Bar	rtlett C				
	HEDUL ME OF	SUBTOTAI	L AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
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)R	\$	
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.	X	SCHEDULE E: LOANS		\$	0.00
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	0.00
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 TO FILER	RETURNED	\$	
				•	

	DGED CONTRIBU				SCHEDULE B	
The Instruction Guide explains how to complete this form				1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5		
2 FILER N	AME			3 Filer ID (Ethics 0	Commission Filers)	
Bartlett (Cocke General Contractors I	Political Action Com	mittee	00066192		
4 TOTAL	. OF UNITEMIZED PLED	GES		\$	0.00	
5 Date	6 Full name of pledgor	out-of-state PAC	C (ID#:	8 Amount of pledge (\$)	In-kind description (If applicable)	
				μleage (ψ) 	(ii applicable)	
	7 Pledgor Address;	City; State; Zip	Code			
				Check if travel outside	of Texas. Complete Schedule T	
10 Principal	occupation / Job title (See Instr	uctions)	11 Employer (See In	tructions)		

	LOANS					SCHEDULE E		
	The Instruction Guide explains how to complete this form				Total pages Schedule E: Sch: 1/1 Rpt: 5/5			
2	FILER NAME Bartlett Cocke General Contractors Political Action Committee				3 Filer ID (Ethics Commission Filers) 00066192			
4	TOTAL OF UN	IITEMIZED LOANS				\$ 0.0	00	
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)		
6	Is lender a financial institution?	8 Lender address; Ci	ty; State;	Zip Code		10 Interest Rate		
						11 Maturity Date		
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instructions)				
14	Description of Col	lateral		15 Check if personal fu	nds were deposite	d into political account (See Instructions)		
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)	\exists	
	not applicable	18 Guarantor address; Ci	ty; State;	Zip Code				
20	Principal occupati	n On		21 Employer (See Instr	uctions)	1		