CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

								-	
1		ics Commission Filers)	2 Total pages					OFFICE U	SE ONLY
	00016168			9				Date Received	
3	COMMITTEE NAME	Houston LGBTQ+ Politi	cal Caucus PA	/C				ELECTRONICAL 05/20/2024	LY FILED
4	TREASURER NAME	Rublein, Aaron							
								Date Hand-delivered or D	Date Postmarked
5	ORIGINAL REPORT TYPE	January 15		Runot	ff				
		July 15		10th c	day after ca	mpaign treası	urer resignation	Receipt #	Amount
		30th day before election		Disso	lution report	t			
		8th day before election	X	Other	(specify)	April 5		Date Processed	
6	ORIGINAL PERIOD COVERED	Month Day Yea 02/26/2024	ır THRO	UGH	Month 03/	Day 25/2024	Year	Date Imaged	
7	EXPLANATION OF (
Or	n May 5, 2024, I learne	d I was incorrectly recordin	g political contril	outions	managed	by a third p	arty. I am corre	cting all affected filin	gs.
8	AFFIDAVIT								
					ear, or affir correct.	m, under pe	enalty of perjury	, that this corrected I	report is true
				Chec	k the box	next to any	and all applicat	ole statements:	
					was made	e in good fa	ith and without	affirm, that the origina an intent to mislead aed in the report.	
				X	report not that the re swear, or	t later than t eport as orig	he 14th busines ginally filed is in any error or or	that I am filing this c ss day after the date accurate or incomple ission in the report a	l learned ete. l
							Aaron Rub	olein	
						Signa	ature of Campai		
	AFFIX NOTARY ST	AMP / SEAL ABOVE				U		-	
	Sworn to and subso	ribed before me, by the sai	d				, this th	ie	day
		, 20, to cert							
	Signature of offic	er administering oath	Printed nam	e of off	icer admin	istering oat	h T	Title of officer admini	stering oath
		Remember To Att Nee	ded To Rep	ort Ar	nd Expla	ain Corre		ort Form	V(4.1.0.d270abc)

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

т	The MPAC Instruction Guide explains how to complete this form. 1 Filer ID 2 Total pages filed: (Ethics Commission Filers) 00016168 9						
3	COMMITTEE NAME			OFFICE USE ONLY			
	Houston LGBTO+	Political Caucus PAC					
				Date Received			
				ELECTRONICALLY FILED			
				05/20/2024			
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP				
	ADDRESS	P.O. Box 66664					
	—						
	Change of Address	Houston, TX 77266-6664		Date Hand-delivered or Date Postmarked			
5		MS / MRS / MR FIRST	MI				
	TREASURER NAME	Aaron		Receipt # Amount			
		NICKNAME LAST	SUFFIX	Date Processed			
			SUFFIX				
		Rublein		Date Imaged			
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY; STA	ATE; ZIP CODE			
ľ	TREASURER	3517 Audubon PI, Apt 6	AFT/SOILE#, CITT, ST	ATE, ZIF CODE			
	STREET ADDRESS						
	(Residence or Business)						
		Houston, TX 77006					
7	CAMPAIGN TREASURER	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; ST	ATE; ZIP CODE			
	MAILING	3517 Audubon Pl, Apt 6					
	ADDRESS						
	Change of Address	Houston, TX 77006					
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION				
	TREASURER PHONE	(612) 423-2559					
		(012) 120 2000					
9	REPORT TYPE	X Monthly	10th day after campaign	Dissolution (Attach PAC-DR)			
			L treasurer termination				
10	MONTHLY	January 5 X April	5 July 5	October 5			
	REPORT FILING DEADLINE	January 5 X April					
		February 5 May	5 August 5	November 5			
		March 5 June	5 September 5	December 5			
11	L PERIOD COVERED	Month Day Year	THROUGH Month	Day Year			
	COVERED	02/26/2024	03/25/2	.024			
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1		GO	TO PAGE 2				
Fo	rms provided by Tex	as Ethics Commission www.et	hics.state.tx.us	Version V4.1.0.d378aba0			

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 File	r ID	(Ethics Commission Filers)
Houston LGBTQ+ Politie	cal Caucus PAC		000	16168	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Molly Cook State Senat	or		
(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 TH OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	IAN	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI	I L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOA	NS)	\$	1,900.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE G PERIOD	E LAST DAY	\$	54,343.88
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS A REPORTING PERIOD	AS OF THE	\$	0.00
16 AFFIDAVIT				•	
		I swear, or affirm, under penal true and correct and includes a under Title 15, Election Code.	ty of perjury, th all information i	nat the acc required t	companying report is o be reported by me
			Aaron Rublei	in	
		Signature	e of Campaign	Treasure	r
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	before me, by the said		, this the _		day
of	, 20, to certify v	which, witness my hand and seal of office.			
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title	e of office	r administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us			Version V4.1.0.d378aba0

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC

Page 4 of 9

						r age r er e
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Houston LGBTQ+ Political					00016168	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Lauren Simmons S	State Represe	ntative	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Gemayel Haynes(Criminal Distri	ct Court Judge	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Annette Ramirez H	larris County	Tax Assessor-	Collector
(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.)					

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC

	CAUCUS PAC Candidates dentify by name or, if pplicable, classify by party.)	A. Supported	Jorny Podrigu		13 Filer ID 00016168	Page 5 of 9 (Ethics Commission Filers)
Houston LGBTQ+ Political Ca 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this	. Candidates		Jorn/ Podrigu			
ACTIVITY (Ic ap (Attach lists on plain paper to complete this			Jorny Podriguy		00010100	
paper to complete this report if necessary.)		B. Opposed		ez Harris County C	Constable Preci	nct 5
		в. Opposed				
	2. Measures Describe by date and pocation of election and ature of issue.)	A. Supported				
		B. Opposed				
	 Officeholders Assisted dentify by name or, if pplicable, classify by party.) 					

FORM MPAC COVER SHEET PG 3

6 of 9

Houston LGBTQ+ Political Caucus PAC 00016168 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE SUBTOTAL AMOUNT 1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 1,90 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 1,90 3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ \$ 4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$ 5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR \$
NAME OF SCHEDULE SUBTOTAL AMOUNT 1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 1,90 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$
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2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ 3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR \$ 5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR \$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS \$ 4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR \$ 5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR \$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR \$ 5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR
4. ORGANIZATION \$ 5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR •
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR \$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION
9. SCHEDULE E: LOANS \$
10. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$
14. X SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 4,92
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$

SUBTOTALS - MPAC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 7/9	
5	FILER NAME			2	Filer ID (Ethics Commission	Filore)
Ľ				°		rileis)
	Houston LG	3TQ+ Political Caucus PAC			00016168	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	03/03/2024	ActBlue Texas				\$250.00
		6 Contributor address; City; State; Zip Code				
		Contributor address, City, State, Zip Code				
		Somerville, MA 02144				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
⊨				<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/17/2024	ActBlue Texas				\$400.00
		Contributor address; City; State; Zip Code		1		
		Somonvillo MA 02144				
⊢		Somerville, MA 02144				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
F	Date	Full name of contributor out-of-state PAC (ID#:)	1	Amount of Contribution (\$)	
)			1 050 00
	03/24/2024	ActBlue Texas			*	\$1,250.00
		Contributor address; City; State; Zip Code				
		Somerville, MA 02144				
⊢	Dringing age	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Philipal Occu	pation / Job little (See Instructions))		
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1						
1						

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

Sch: 1/2 Rpt: 8/9 Houston LGBTQ+ Political Caucus PAC Date 5 Payee name 03/03/2024 ActBlue Amount (\$) 7 Payee Address; City; State; Zip 9.88 366 Summer St Expenditure from corporate funds Sommerville, MA 02144 PURPOSE OF EXPENDITURE (a) Category (See instructions for examples of acceptable categories) (b) Description (See Fees for managi Date 03/17/2024 Payee name Fees Fees for managi Date 03/17/2024 Payee Address; City; State; Zip Sommerville, MA 02144 Amount (\$) Payee Address; City; State; Zip (b) Description (See Fees 15.81 Sommerville, MA 02144 Fees PURPOSE OF EXPENDITURE (a) Category (See instructions for examples of acceptable categories) (b) Description (See Fees for managi Date Of EXPENDITURE Payee name Sommerville, MA 02144 Fees for managi Date 03/24/2024 Payee name Sommer St See for managi Date 03/24/2024 Payee name See for managi 03/24/2024 ActBlue ActBlue ActBlue Amount (\$) Payee Address; City; State; Zip Se6 Summer St	Filer ID (Ethics Commission Filers) 00016168
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Amount (\$) Payee Address; City; State; Zip 15.81 366 Summer St Expenditure from corporate funds Sommerville, MA 02144 PURPOSE OF EXPENDITURE (a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See Fees for managi Date Of EXPENDITURE Payee name (b) Description (See Fees for managi Date O3/24/2024 ActBlue ActBlue Amount (\$) Payee Address; City; State; Zip (b) Description (See Fees for managi 49.38 366 Summer St Sommerville, MA 02144 PURPOSE OF EXPENDITURE (a) Category (See instructions for examples of acceptable categories) for gees for managi (b) Description (See Fees for managi Date OF EXPENDITURE Sommerville, MA 02144 Fees for managi (b) Description (See Fees for managi Date OF EXPENDITURE Got Category (See instructions for examples of acceptable categories) of Expenditure from Sommerville, MA 02144 (b) Description (See Fees for managi Date OF EXPENDITURE Payee name (a) Category (See instructions for examples of acceptable categories) for gees for managi Date OF EXPENDITURE Payee name (b) Description (See Fees for managi Date OF EXPENDITURE Payee Address; City; State; Zip (c) POX 66664	
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03/24/2024 ActBlue Amount (\$) Payee Address; City; State; Zip 49.38 366 Summer St	
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OF EXPENDITURE Fees Fees for managing Date Payee name 03/04/2024 Amount (\$) Payee Address; City; State; Zip Power Address; City; State; Zip	
03/04/2024 Langner, Tina Amount (\$) Payee Address; City; State; Zip PO BOX 66664 City; State; Zip	nstructions regarding type of information required.) g contributions.
Amount (\$) Payee Address; City; State; Zip	
P.O. POX 66664	
P.O. BOX 66664	
250.00	
Expenditure from	
_ corporate funds Houston, TX 77009	
PURPOSE OF EXPENDITURE (a) Category (See instructions for examples of acceptable categories) (b) Description (See DJ for fundraisin	nstructions regarding type of information required.)

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 2/2 Rpt: 9/9	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Houston LGBTQ+ Political Caucus PAC 00016168 00016168
Date 03/11/2024	5 Payee name Post Oak Hotel
Amount (\$) 4,059.38 Expenditure from corporate funds	7 Payee Address; City; State; Zip 1699 W Loop S Houston, TX 77027
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required. Event Expense Venue rental for fundraising event.
Date 03/09/2024	Payee name Wynne, C.
Amount (\$) 540.00 Expenditure from corporate funds	Payee Address; City; State; Zip P.O. BOX 66664 Houston, TX 77009
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.) Distribution of Endorsement Cards Distributed endorsement cards near polling location