MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00088192					2 Total pages filed: 6	
3	COMMITTEE NAME					OFFICE USE ONLY
	Courthouse Cafe					
						ELECTRONICALLY FILED
						06/03/2024
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	СП	Y; STATE; ZIP		
	ADDRESS	2177 Kennedy Circle Ste. E				
	_					
	Change of Address	McAllen, TX 78501				Date Hand-delivered or Date Postmarked
5	CAMPAIGN	MS / MRS / MR FIRST			MI	
	TREASURER NAME	Samuel				Receipt # Amount
						Date Processed
		NICKNAME LAST			SUFFIX	
		Benson				Date Imaged
6	CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY	'; STA	ATE; ZIP CODE
	STREET	2205 West Jackson Avenue				
	ADDRESS					
	(Residence or Business)	McAllen, TX 78501				
7	CAMPAIGN	STREET ADDRESS OR PO BOX;		APT / SUITE #; CIT	(; ST.	ATE; ZIP CODE
	TREASURER	2205 West Jackson Avenue			-	
	MAILING ADDRESS					
		McAllen, TX 78501				
8	CAMPAIGN	AREA CODE PHONE NUMBER		EXTENSION		
	TREASURER PHONE	(505) 675-5733				
9	REPORT TYPE	X Monthly	Г	10th day after campaigr	Г	Dissolution (Attach PAC-DR)
		X Wonthly	L	treasurer termination	L	
10	MONTHLY		E			
	REPORT FILING DEADLINE	January 5 April	5	July 5		October 5
		February 5 May	5	Augus	5	November 5
		March 5 X June	5	Septer	nher 5	December 5
11		Month Day Year	- HP	OUGH	Month	Day Year
	COVERED	04/26/2024		00011	05/25/2	2024
		GO 1	ГО	PAGE 2		
Fo	rms provided by Tex	as Ethics Commission www.et	hic	s.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 Filer ID	(Ethics Commission Filers)		
Courthouse Cafe			00088192			
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. Anthony Limon Sharyland	School Board I	Place #3		
(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	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)	\$	0.00		
EXPENDITURE TOTALS				0.00		
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			0.00		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			0.00		
16 AFFIDAVIT						
		I swear, or affirm, under penalty of per true and correct and includes all inforn under Title 15, Election Code.	jury, that the acc nation required t	companying report is o be reported by me		
			Benson			
		Signature of Can	npaign Treasure	r		
AFFIX NOTARY	AFFIX NOTARY STAMP / SEAL ABOVE					
		, th	is the	day		
of	, 20, to certify v	vhich, witness my hand and seal of office.				
Signature of officer adr	ninistering oath	Printed name of officer administering oath	Title 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 ADDENDUM

					Page 3 of 6
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Courthouse Cafe				00088192	· · · · · ·
14 COMMITTEE	1. Candidates	A. Supported	d Judge Juan Alvarez District Ju	dge	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supporte	d		
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supporte	d		
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported	d		
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted		Judge Sonia Trevino Justice of	f the Peace	
	(Identify by name or, if applicable, classify by party.)				

FORM MPAC COVER SHEET PG 3

4 of 6

17 COMMIT	(Ethics Commission Filers)				
Courthou					
19 SCHEDU NAME OF	SUBTOTAL AMOUNT				
1. X	\$ 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	\$			
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION				
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 CONTRIBUTIONS	5	\$ 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. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00		
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$		
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$		

SUBTOTALS - MPAC

PLEDGED CONTRIBUTIONS	SCHEDULE B			
The Instruction Guide explains how to complete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 5/6			
2 FILER NAME Courthouse Cafe	3 Filer ID (Ethics Commission Filers) 00088192			
⁴ TOTAL OF UNITEMIZED PLEDGES	\$ 0.00			
5 Date 6 Full name of pledgor out-of-state PAC (ID#:) 7 Pledgor Address; City; State; Zip Code	8 Amount of 9 In-kind description pledge (\$) (If applicable) Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)				

LOANS SCHEDULE E						
The Instruction Guide explains how to complete this form.	ges Schedule E: 1 Rpt: 6/6					
2 FILER NAME Courthouse Cafe	(Ethics Commission 192	n Filers)				
⁴ TOTAL OF UNITEMIZED LOANS		\$	0.00			
5 Date of loan 7 Name of lender out-of-state PAC (ID#:		9 Loan Amount (\$)			
6 Is lender a 8 Lender address; City; State; Zip Code financial institution?		10 Interest Rate11 Maturity Date				
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions)	ons)					
14 Description of Collateral 15 Check if personal funds None	were deposite	d into political accoun (See Instructions				
16 GUARANTOR 17 Name of guarantor INFORMATION		19 Amount Guaran	teed (\$)			
not applicable 18 Guarantor address; City; State; Zip Code						
20 Principal occupation 21 Employer (See Instruction	ons)	1				