MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC **COVER SHEET PG 1**

⊨			1 Filer ID	0 Tatal same file du		
Tł	ne MPAC Instruction (2 Total pages filed:4				
3	COMMITTEE NAME	OFFICE USE ONLY				
	Texas Pro Busines	s Coalition				
				ELECTRONICALLY FILED		
				06/26/2024		
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP			
	ADDRESS	PO Box 953				
	Change of Address	Colleyville, TX 76034				
╞╴			N/I	Date Hand-delivered or Date Postmarked		
19	CAMPAIGN TREASURER	MS / MRS / MR FIRST	MI			
	NAME	Frederick	С.	Receipt # Amount		
				Date Processed		
		NICKNAME LAST	SUFF	·IX		
		Tate		Date Imaged		
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY; S	TATE; ZIP CODE		
	TREASURER	959 W Glade Rd				
	STREET ADDRESS					
	(Residence or Business)					
		Hurst, TX 76054				
7	CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; S	STATE; ZIP CODE		
	TREASURER	PO Box 953				
	MAILING ADDRESS					
	Change of Address					
		Colleyville, TX 76034				
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION			
	TREASURER PHONE	(469) 290-7500				
	1 HONE	(400) 200 1000				
9	REPORT TYPE		10th day after campaign			
		X Monthly	treasurer termination	Dissolution (Attach PAC-DR)		
1.0) MONTHLY REPORT FILING	January 5 April	5 X July 5	October 5		
	DEADLINE					
		February 5 May	5 August 5	November 5		
		March 5 June	5 September 5	December 5		
11	L PERIOD	Month Day Year	Mont	n Day Year		
	COVERED	05/26/2024	THROUGH	5/2024		
		00/20/2021	00/2			
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L Fo	Forms provided by Texas Ethics Commission www.ethics.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 F			13 Filer ID	(Ethics Commission Filers)		
Texas Pro Business Coalition 0008			000849	981		
14 COMMITTEE	1. Candidates	A. Supported				
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				
	(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.)					
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		POLITICAL EXPENDITURES	\$	0.00		
	4. TOTAL POLITICA	L EXPENDITURES	\$	384.96		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	11,988.59		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00		
16 AFFIDAVIT						
I 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.						
	Frederick C. Tate					
Signature of Campaign Treasurer						
AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed before me, by the said day						
of, 20, to certify which, witness my hand and seal of office.						
Signature of officer ad	ministering 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 V4.1.0.d378aba0		

S	JBT	FORM MPAC		
			C	OVER SHEET PG 3 3 of 4
	MMITTI kas Pro	(Ethics Commission Filers)		
	19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			\$
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			\$
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			\$
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.		SCHEDULE E: LOANS		\$
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 384.96
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
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 TO FILER	RETURNED	\$

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Fees Offic Food/Beverage Expense Polli Gift/Awards/Memorials Expense Prin	n Repayment/Reimbursement e Overhead/Rental Expense ng Expense ing Expense ries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schodula E1			2 Filer ID (Ethios Commission Filere)
1 Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 4/4	Texas Pro Business Coalition		00084981
4 Date	5 Payee name		
06/11/2024	CFO Shield, LLC dba Red Elephant Repor	S	
6 Amount (\$)	7 Payee address; City; State; Zip	Codo	
\$351.79	959 W. Glade Rd.	Coue	
Expenditure from corporate funds	Hurst, TX 76035		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	Check if Austin,	nutside of Texas. Complete Schedule T. TX, officeholder living expense okkeeping Services & Support
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF		sought	Office held
Date	Payee name		
06/17/2024	Plains Capital Bank		
Amount (\$)	Payee address; City; State; Zip	Codo	
\$33.17	325 Saint Paul Street, Suite 800 Dallas, TX 75201		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		utside of Texas. Complete Schedule T. TX, officeholder living expense Ce Fee
Complete ONLY if direct expenditure to benefit C/OF		sought	Office held