FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00042961 3 COMMITTEE NAME **OFFICE USE ONLY** Gulf States Toyota Inc. State PAC Date Received **ELECTRONICALLY FILED** 07/01/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 1375 Enclave Pkwy. Change of Address Houston, TX 77077 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Laird M. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Doran CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 1375 Enclave Pkwy. STREET **ADDRESS** (Residence or Business) Houston, TX 77077 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1375 Enclave Pkwy. MAILING **ADDRESS** Change of Address Houston, TX 77077 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 580-3635 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 X July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 05/26/2024 06/25/2024

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer	ID	(Ethics Commission Filers)
Gulf States Toyota Ir	nc. State PAC		0004	12961	
L4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Carol Alvarado State Se	enator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	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 M	POLITICAL CONTRIBUTIONS (OTHER TH OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	IAN	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOAN	NS)	\$	300,290.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	126,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE G PERIOD	LAST DAY	\$	235,872.85
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS A REPORTING PERIOD	S OF THE	\$	0.00
6 AFFIDAVIT					
		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
		Mr.	. Laird M. Doi	ran	
		Signature	e of Campaign	Treasur	er
AFFIX NOTA	RY STAMP / SEAL ABOVE				
Sworn to and subscrib	ped before me, by the said		, this the _		day
		which, witness my hand and seal of office.			
Signature of officer	administering oath	Printed name of officer administering oath	ıitle	OI OTTICE	er administering oath

						Page 3 of 21
2 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. St	tate PAC				00042961	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Cesar Blanco S	tate Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.))				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Sarah Eckhardt	State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Armando Walle	State Represen	tative	
(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				
		5. 5,1				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

						Page 4 of 21
2 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. St	ate PAC				00042961	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Royce West S	tate Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Eddie Morales	State Represen	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Gina Hinojosa	State Represen	ıtative	
(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				
		Б. Орросса				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

					Page 5 of 21
12 COMMITTEE NAME				13 Filer ID) (Ethics Commission Filers)
Gulf States Toyota Inc. Sta	ate PAC			00042	2961
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Christian Manuel Sta	ate Representative	
(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.)		Toni Rose State Rep	presentative	
(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			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		James Talarico State	e Representative	
(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			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

			_			Page 6 of 21
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. Sta	ate PAC				00042961	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Gene Wu State Re	epresentative		
(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.)		Ann Johnson State	e Representat	ive	
(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	Candidates (Identify by name or, if applicable, classify by party.)		Joseph Moody Sta	ate Representa	ative	
(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.)					

						Page 7 of 21
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. Sta	ate PAC				00042961	
14 COMMITTEE ACTIVITY (Attach lists on plain	Candidates (Identify by name or, if applicable, classify by party.)		Claudia Ordaz Sta	ate Representa	ative	
paper to complete this report if necessary.)						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mary Gonzalez St	ate Represent	ative	
(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	Candidates (Identify by name or, if applicable, classify by party.)		Dan Patrick Lieute	enant Governo	r	
(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.)					
	The second of barry	I				

						Page 8 of 21
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. Sta	ate PAC				00042961	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Paul Bettencou	rt State Senator		
(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	Candidates (Identify by name or, if applicable, classify by party.)		Caroline Harris	State Represent	tative	
(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				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Angela Paxton	State Senator		
(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				
	Officeholders Assisted (Identify by name or, if applicable classify by name)					

						Page 9 of 21
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. Sta	ate PAC				00042961	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Steve Toth State	e Representative	2	
(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	Candidates (Identify by name or, if applicable, classify by party.)		Brent Money Sta	ate Representati	ve	
(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				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Caroline Fairly S	State Representa	ative	
(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					
	(Identify by name or, if applicable, classify by party.)					

FORM MPAC MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 10 of 21 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) Gulf States Toyota Inc. State PAC 00042961 14 COMMITTEE 1. Candidates A. Supported Janis Holt State Representative **ACTIVITY** (Identify by name or, if applicable, classify by party.) (Attach lists on plain B. Opposed paper to complete this report if necessary.) A. Supported 2. Measures (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.

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				11 of 21	1
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Commission Filers)	
l		s Toyota Inc. State PAC	00042961	(
			00042301		
		E SUBTOTALS		SUBTOTAL AMOUNT	.
NAI	ME OF	SCHEDULE			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 300,000).00
2.	П	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
-	ш	(,		*	
3.	Ш	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO)R	\$	
	Ш	ORGANIZATION		*	
		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR		
5.	Ш	LABOR ORGANIZATION	thor or	\$	
6.	П	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
•	ш			 	
		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR			
7.	X	ORGANIZATION		\$ 290	0.00
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	 	
	ш	CONESCE B. TEEDOED CONTRIBOTION CONTRIBOTICA CONTRIBOTICA CONTRIBOTICA CONTRIBOTICA CONTRIBOTICA CONTRIBOTICA CONTRIBOTICA	31(3)(11)2/(11)31(٩	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 126,000	ا ۱۸۸
10.		SCHEDOLE 11. 1 SETTICAL EXILENDITORES FROM 1 SETTICAL CONTRIBUTION	5	120,000	,.00
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	 	
1	Ш	SCHEDOLE 13. 1 SKCHASE OF HAVESTWIENTSTROWN GENTOLE CONTRIBUTA	3113) a	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	\Box	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	NIS.	6	
1	ш	SCHEDOLE I. NON'T CEITICAL EXI ENDITORES I ROMIT CEITICAL CONTRIBUTIO	3113	\$	
		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	DETLIDNED		
15.		TO FILER	KETOKNED	\$	
i					- 1
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TARY POLITICAL CONTRIBUT	IONS	SCHEDULE A1
ruction Guide explains how to complete this	s form.	Total pages Schedule A1: Sch: 1/1 Rpt: 12/21
IE s Toyota Inc. State PAC	3	B Filer ID (Ethics Commission Filers) 00042961
_) 7	7 Amount of Contribution (\$) \$300,000.00
Houston, TX 77077		
cupation / Job title (See Instructions) Executive	9 Employer (See Instructions) Friedkin Companies, Inc.	
	uction Guide explains how to complete this E S Toyota Inc. State PAC 5 Full name of contributor out-of-state PAC (IE) Friedkin, Thomas D. 6 Contributor address; City; State; Zip Code Houston, TX 77077 cupation / Job title (See Instructions)	E S Toyota Inc. State PAC 5 Full name of contributor out-of-state PAC (ID#:

NON-MONETARY SUPPORT FROM CORPORATION SCHEDULE C4 **OR LABOR ORGANIZATION** 1 Total pages Schedule C4: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 13/21 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Gulf States Toyota Inc. State PAC 00042961 Date 5 Corporation / Labor Organization name 6 Amount (\$) 06/25/2024 Gulf States Toyota Inc. 290.00

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Candidate/Officeholder/Politica		
Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	rs)
Sch: 1/8 Rpt: 14/21	Gulf States Toyota Inc. State PAC 00042961	
4 Date	5 Payee name	
06/24/2024	Angela Paxton Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,500.00	5613 S. Woodcreek Circle	
Expenditure from corporate funds	McKinney, TX 75071	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
LAFENDITORE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
	Contribution	
O Commission ONLY if dispose	Condidate/Officeholder page Office accupit	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
Date	Payee name	
06/04/2024	Ann Johnson Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	PO Box 56386	
Expenditure from		
corporate funds	Houston, TX 77256	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Candidate/Oniceriolde//Folitical Committee	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	Н	
Date	Payee name	
06/03/2024	Armando Walle Committee	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,500.00	4826 Hollybrook Lane	
Expenditure from corporate funds	Houston, TX 77039	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Candidate/Officeholder/Political Committee	
	Contribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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: 2/8 Rpt: 15/21	Gulf States Toyota Inc. State PAC 00042961
4 Date	5 Payee name
06/24/2024	Brent Money Campaign
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code2606 Lee St
Expenditure from corporate funds	Greenville, TX 75401
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/03/2024	Carol Alvarado Campaign for Texas Senate
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	PO Box 230842
Expenditure from	
corporate funds	Houston, TX 77223
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/24/2024	Caroline Fairly Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	1000 S. Tyler St.
	Apt 10
Expenditure from corporate funds	Amarillo, TX 79101
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	•

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/8 Rpt: 16/21	Gulf States Toyota Inc. State PAC 00042961
4 Date	5 Payee name
06/24/2024	Caroline Harris Davila Campaign
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code PO Box 700
Expenditure from corporate funds	Round Rock, TX 78680
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/03/2024	Cesar Blanco for Senate
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	PO Box 929
Expenditure from corporate funds	El Paso, TX 79946
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
06/04/2024	Christian Manuel Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	3801 Turtlecreek Dr
Expenditure from corporate funds	Port Arthur, TX 77642
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Contribution
Complete CALL V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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: 4/8 Rpt: 17/21	Gulf States Toyota Inc. State PAC 00042961
4 Date	5 Payee name
06/04/2024	Claudia Ordaz Perez Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 71738
Expenditure from corporate funds	El Paso, TX 79917
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Contribution
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/24/2024	Friends of Paul Bettencourt
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	1 E Greenway Plaza STE 225
42,000.00	
Expenditure from corporate funds	Houston, TX 77046
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/04/2024	Gene Wu Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	5522 Jessamine
Expenditure from corporate funds	Houston, TX 77081
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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: 5/8 Rpt: 18/21	Gulf States Toyota Inc. State PAC 00042961
4 Date	5 Payee name
06/04/2024	Gina Hinojosa Campaign
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 300095
, , , , , ,	
Expenditure from corporate funds	Austin, TX 78703
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/04/2024	James Talarico Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	P.O.Box 15207
Ψ500.00	1 .O.Box 13201
Expenditure from corporate funds	Austin, TX 78761
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/24/2024	Janis Holt Campaign
Amount (\$)	Payee address; City; State; Zip Code PO Box 1311
\$500.00	PO B0X 1311
Expenditure from corporate funds	Silsbee, TX 77656
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7 1 0 1 1 5	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1:	
Sch: 6/8 Rpt: 19/21	Gulf States Toyota Inc. State PAC 00042961
4 Date	5 Payee name
06/04/2024	Joseph Moody Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	PO Box 920827
\$1,500.00	FO BOX 920021
Expenditure from	
corporate funds	El Paso, TX 79902
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	B
Date	Payee name
06/04/2024	Mary Gonzalez Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 450
Expenditure from corporate funds	Clint, TX 79836
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee Contribution
	Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experientare to beliefit 6/6	
Date	Payee name
06/04/2024	Morales For Texas
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	352 Hillcrest Blvd
Φ1,500.00	552 Filliotest DIVU
Expenditure from	
corporate funds	Eagle Pass, TX 78852
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	н

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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: 7/8 Rpt: 20/21	2 FILER NAME Gulf States Toyota Inc. State PAC 3 Filer ID (Ethics Commission Filers) 00042961
4 Date	5 Payee name
06/03/2024	Royce West Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	320 S R.L Thornton Fwy
Expenditure from	Suite 220
corporate funds	Dallas, TX 75203
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/03/2024	Sarah Eckhardt
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 301586
Expenditure from corporate funds	Austin, TX 78703
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if disease	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	
Date	Payee name
06/24/2024	Steve Toth Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	67 Chestnut Meadow Dr.
Expenditure from corporate funds	Conroe, TX 77384
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Contribution
Complete CNII V if alia	Condidate/Officeholder name Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
p. 1	

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
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
•	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/8 Rpt: 21/21	Gulf States Toyota Inc. State PAC 00042961
4 Date	5 Payee name
06/24/2024	Texans for Dan Patrick
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100,000.00	1 E Greenway Plaza STE 225
Expenditure from corporate funds	Houston, TX 77046
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Candidate/Officeholder/Political Committee
	Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/04/2024	Toni Rose Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 41867
Expenditure from corporate funds	Dallas, TX 75241
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	IT.
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