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) 00063381 3 COMMITTEE NAME **OFFICE USE ONLY** Cobb Fendley PAC Date Received **ELECTRONICALLY FILED** 07/02/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 4424 W. Sam Houston Parkway North Suite 600 Change of Address Houston, TX 77041 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Monica F. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Silver CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER 4424 W. Sam Houston Parkway North STREET **ADDRESS** Suite 600 (Residence or Business) Houston, TX 77041 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 4424 W. Sam Houston Parkway North MAILING **ADDRESS** Suite 600 Change of Address Houston, TX 77041 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 462-3242 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

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME			13 Filer		(Ethics Commission Filers)
Cobb Fendley PAC			0006	3381	
4 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 (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
		B. Opposed			
	3. Officeholders	Sen. Cesar Blanco State Se	nator		
	Assisted (Identify by name or, if applicable, classify by party.)				
5 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	L CONTRIBUTIONS		s	0.00
	(OTHER THAN PLEI	DGES, LOANS, OR GUARANTEES OF LOANS)		Ψ	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	;	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	,	\$	18,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAS G PERIOD	ST DAY	\$	108,718.47
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	FTHE	\$	0.00
6 AFFIDAVIT	I				
		I swear, or affirm, under penalty of true and correct and includes all inf under Title 15, Election Code.			
		Moni	ca F. Silve	ır	
		Signature of C	Campaign T	reasure	er
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	before me, by the said		, this the		day
		which, witness my hand and seal of office.			
Signature of officer add	ministering oath	Printed name of officer administering oath	Title	of office	er administering oath

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

				Page 3 of 7
			13 Filer ID	(Ethics Commission Filers)
			00063381	
1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
	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.)		Rep. John Bryant State Represe	entative	
<u> </u>				
(Identify by name or, if				
	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.)		Rep. Will Metcalf State Represe	ntative	
<u> </u>				
(Identify by name or, if				
	B. Opposed			
Measures (Describe by date and location of election and nature of issue.)	A. Supported			
liame of issue,	B. Opposed			
3. Officeholders Assisted		The Honorable Mario Castillo Ci H	ty of Houston (Council Member, District
	(Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.)	Cldentify by name or, if applicable, classify by party.	(Identify by name or, if applicable, classify by party.) B. Opposed 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.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported B. Opposed B. Opposed A. Supported B. Opposed A. Supported B. Opposed B. Opposed A. Supported B. Opposed A. Supported B. Opposed A. Supported B. Opposed B. Opposed A. Supported Clearliby by name or, if applicable, classify by party.) B. Opposed A. Supported Clearliby by name or, if applicable, classify by party.) B. Opposed A. Supported Clearliby by name or, if applicable classify by party.) B. Opposed A. Supported Clearliby by name or, if applicable classify by party.) B. Opposed A. Supported Clearliby by name or, if applicable classify by party.) B. Opposed A. Supported D. The Honorable Mario Castillo Ci	1. Candidates (identify by name or, if applicable, classify by party.) B. Opposed 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.) B. Opposed 1. Candidates (identify by name or, if applicable, classify by party.) B. Opposed 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.) B. Opposed 3. Officeholders Assisted (identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (identify by name or, if applicable, classify by party.) B. Opposed 4. Supported (identify by name or, if applicable, classify by party.) B. Opposed 5. Opposed 6. Opposed 7. Measures (identify by name or, if applicable, classify by party.) B. Opposed 7. Measures (Describe by date and location of election and nature of issue.) B. Opposed 7. Measures (Describe by date and location of election and nature of issue.) B. Opposed 7. Measures (Describe by date and location of election and nature of issue.) B. Opposed 7. Measures (Describe by date and location of election and nature of issue.) B. Opposed 7. Measures (Describe by date and location of election and nature of issue.) B. Opposed 7. Measures (Describe by date and location of election and nature of issue.) B. Opposed

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC

					ADDENDUM
					Page 4 of 7
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Cobb Fendley PAC				00063381	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(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.)		Commissioner Rodney Ellis Ha	rris County Con	nmissioner, Precinct 1
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(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		Commissioner Ryan Dagley Ch	ambers County	, Precinct 4
	(Identify by name or, if applicable, classify by party.)				

SUBTOTALS - MPAC COVER SHEET PG 3 5 of 7 COMMITTEE NAME Cobb Fendley PAC SCHEDULE SUBTOTALS SUBTOTAL AMOUNT

	Cobb Fendley PAC 18 Filer ID 00063381			(Etnics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			\$
2.	SC	HEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION \$			\$
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		ANIZATION	\$
7.		HEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR GANIZATION		\$
8.	SC	HEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	RGANIZATION	\$
9.	SC	HEDULE E: LOANS		\$
10.	K SC	HEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$ 18,000.00
11.	sc	HEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	sc	HEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	DNS	\$
13.	sc	HEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	sc	HEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
15.		HEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F FILER	RETURNED	\$

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

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: 1/2 Rpt: 6/7	Cobb Fendley PAC 00063381
4 Date	5 Payee name
06/06/2024	Cesar Blanco for Texas Senate
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code P.O. Box 929
Expenditure from corporate funds	El Paso, TX 79946
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
ZA ZHBITORZ	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/06/2024	John Bryant Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	P.O. Box 140977
Expenditure from corporate funds	Dallas, TX 75214
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/10/2024	Mario Castillo Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 56386
. ,	
Expenditure from corporate funds	Houston, TX 77256-6386
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LA LABITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
0 1. 6	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
onponditure to beliefit 6/01	•

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 2/2 Rpt: 7/7	Cobb Fendley PAC 00063381
4 Date	5 Payee name
06/24/2024	Rodney Ellis Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15,000.00	P.O. Box 56386
Expenditure from corporate funds	Houston, TX 77256-6386
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.
	Candidate/Officeholder/Political Committee
	Campaign Continuation
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete ONLY if direct expenditure to benefit C/O	
Date	Payee name
06/24/2024	Ryan Dagley Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	9015 Waterpoint Drive
Expenditure from corporate funds	Beach City, TX 77523
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/Officeholder/Political Committee
	Sampaigh Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
06/06/2024	Will Metcalf Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	P.O. Box 454
Expenditure from corporate funds	Conroe, TX 77305
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
	Campaign Contribution
Complete ONLY 4 - 11-1-14	Candidate/Officeholder name Office sought
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
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