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) 00016341 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Cable Association, Inc. PAC Date Received **ELECTRONICALLY FILED** 07/03/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 919 Congress Ave., Ste. 1350 Change of Address Austin, TX 78701 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Meredyth NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Fowler CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 919 Congress Avenue STREET **ADDRESS** Suite 1350 (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 919 Congress Avenue MAILING **ADDRESS** Suite 1350 Change of Address Austin, TX 78701 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 474-2082 x204 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

			-		
2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Cable Associatio	n, Inc. PAC			00016341	
4 COMMITTEE ACTIVITY	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.)	7. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				
.5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M) POLITICAL CONTRIBUTIO OR GUARANTEES OF LOA! ADE ELECTRONICALLY) qualifies for the higher itemizatior	NS, OR	\$	0.00
	TOTAL POLITICAL CONTRIBUTIONS			\$	50.00
	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)				50.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$	0.00
	4. TOTAL POLITICAL EXPENDITURES		\$	0.00	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			DAY \$	5,082.74
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			HE \$	0.00
6 AFFIDAVIT					
		true and correc	rm, under penalty of per at and includes all inforr Election Code.	rjury, that the a nation required	accompanying report is d to be reported by me
			Ms. Mered	lyth Fowler	
			Signature of Car		rer
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	hefore me, by the said		th	nic tha	day
		which, witness my hand and s			uuy
	-	,			
Signature of officer ad	ministering oath	Printed name of officer admir	nistering oath	Title of office	cer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

		3 of 6
17 COMMITTEE NAME	18 Filer ID	(Ethics Commission Filers)
Texas Cable Association, Inc. PAC		
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 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 L ORGANIZATION	_ABOR	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPLABOR ORGANIZATION	PORATION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR (ORGANIZATION	\$
7. X SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LAI ORGANIZATION	BOR	\$ 50.00
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LAB	OR ORGANIZATION	\$
9. X SCHEDULE E: LOANS		\$ 0.00
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUT	ΓIONS	\$ 0.00
11. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
12. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIE	BUTIONS	\$ 0.00
13. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIB	BUTIONS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION TO FILER	ONS RETURNED	\$

PLE	OGED CONTRIBUTIONS		SCHEDULE E	3	
The Instruction Guide explains how to complete this form.			1 Total pages Schedule B: Sch: 1/1 Rpt: 4/6		
2 FILER N	AME		3 Filer ID (Ethics Commission Filers)		
Texas C	able Association, Inc. PAC		00016341		
4 TOTAL	OF UNITEMIZED PLEDGES		\$	0.00	
5 Date	6 Full name of pledgor out-of-state PAC (I	D#:	9 In-kind description pledge (\$) (If applicable)		
	7 Pledgor Address; City; State; Zip Co	ode	pieuge (φ) (παρμισαυίε)		
			Check if travel outside of Texas. Complete Sched	lule T.	
10 Principal	occupation / Job title (See Instructions)	11 Employer (See In:	structions)		

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: 5/6 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Texas Cable Association, Inc. PAC 00016341 Date 5 Corporation / Labor Organization name 6 Amount (\$) 06/14/2024 50.00 Texas Cable Association, Inc.

L	LOANS					SCHEDUL	E E
1	The Instruction Guide explains how to complete this form			ages Schedule E: /1 Rpt: 6/6			
	2 FILER NAME Texas Cable Association, Inc. PAC				3 Filer ID (Ethics Commission Filers) 00016341		
4 1	ΓΟΤΑL OF UN	IITEMIZED LOANS			•	\$	0.00
5 C	Date of loan	7 Name of lender	out-of-state PA	C (ID#:	,	9 Loan Amount (\$)	
fi	s lender a inancial nstitution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12 F	Principal occupation	on / Job title (See Instructio	ns)	13 Employer (See Instruction	ıs)	•	
14 [Description of Coll	ateral		15 Check if personal funds w	ere deposite	d into political account (See Instructions)	
	GUARANTOR NFORMATION	17 Name of guarantor				19 Amount Guarantee	d (\$)
	not applicable	18 Guarantor address;	City; State;	Zip Code			
20 F	Principal occupation	on		21 Employer (See Instruction	ıs)	•	