FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00065957 3 COMMITTEE NAME **OFFICE USE ONLY** Hispanic Republicans of Texas Date Received **ELECTRONICALLY FILED** 07/15/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 28881 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78755 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Milton B. NAME NICKNAME LAST **SUFFIX** Newton STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1115 San Jacinto Blvd STREET **ADDRESS** Ste 275 (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** P.O. Box 28881 MAILING **ADDRESS** Austin, TX 78755 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 477-3100 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 02/25/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Hispanic Republicans o	of Texas		00065957	
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		
	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	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,925.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	3,757.07
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	891.35
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Milton	ı B. Newton	
		Signature of Ca	mpaign Treasur	er
AFFIX NOTARY	' STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, tl	his the	day
		which, witness my hand and seal of office.		
Signature of officer ac	dministering oath	Printed name of officer administering oath	Title of office	er administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

3 of 16						
EE NAME	18 Filer ID	(Ethics Commission Filers)				
Republicans of Texas	00065957					
		SUBTOTAL AMOUNT				
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,925.00				
SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$				
SCHEDULE B: PLEDGED CONTRIBUTIONS		\$				
SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	OR .	\$				
SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$				
SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$				
SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$				
SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$				
SCHEDULE E: LOANS		\$				
SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	\$ 3,757.07					
SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$				
SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$				
	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	Republicans of Texas E SUBTOTALS SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED				

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 4/16	
2	FILER NAME Hispanic Re	FILER NAME Hispanic Republicans of Texas		3	Filer ID (Ethics Commission 00065957	n Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Corey, Deborah 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00	
_	<u> </u>	Midland, TX 79707				
8	 8 Principal occupation / Job title (See Instructions) Accountant 9 Employer (See Instructions SDX Resources, Inc.)		
	Date Full name of contributor out-of-state PAC (ID#:) 05/29/2024 Corey, Deborah Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
		Midland, TX 79707				
	Accountant	pation / Job title (See Instructions)	Employer (See Instructions SDX Resources, Inc.)		
	Date Full name of contributor out-of-state PAC (ID#:) 04/29/2024 Corey, Deborah Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00	
		Midland, TX 79707				
	Principal occu Accountant	pation / Job title (See Instructions)	Employer (See Instructions SDX Resources, Inc.)		
	Date 03/29/2024	Full name of contributor out-of-state PAC (ID#:_ Corey, Deborah Contributor address; City; State; Zip Code Midland, TX 79707			Amount of Contribution (\$)	\$100.00
	Principal occu Accountant	Ipation / Job title (See Instructions)	Employer (See Instructions SDX Resources, Inc.)		
	Date 02/29/2024	Full name of contributor out-of-state PAC (ID#:_ Corey, Deborah Contributor address; City; State; Zip Code Midland, TX 79707)		Amount of Contribution (\$)	\$100.00
	Principal occu Accountant	pation / Job title (See Instructions)	Employer (See Instructions SDX Resources, Inc.)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUL	ILE A1	
	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 2/4 Rpt: 5/16		
2	FILER NAME Hispanic Rep	publicans of Texas			3	Filer ID (Ethics Commissio 00065957	n Filers)	
4	Date 04/29/2024 5 Full name of contributor out-of-state PAC (ID#:) Fonseca, Carlos George 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00			
_	<u> </u>	Richmond, TX 77406		5 1 (0 1 1 1	_			
8	8 Principal occupation / Job title (See Instructions) retired 9 Employer (See Instructions) retired		5)					
	Date Full name of contributor out-of-state PAC (ID#:) 03/05/2024 Gonzales, Jose Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00			
	Round Rock, TX 78680 Principal occupation / Job title (See Instructions) Employer (See Instructions)				 s)			
	Realtor			Austin Absolute Realty				
Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00			
		Corpus Christi, TX 78411						
	Principal occu Insurance	pation / Job title (See Instructions)		Employer (See Instructions The Granado Group	s)			
)	•	Amount of Contribution (\$)	\$100.00		
	Principal occu Insurance	pation / Job title (See Instructions)		Employer (See Instructions The Granado Group	5)			
Date Full name of contributor out-of-state PAC (ID#:) 04/27/2024 Granado, Arturo Contributor address; City; State; Zip Code Corpus Christi, TX 78411		•	Amount of Contribution (\$)	\$100.00				
	Principal occu Insurance	pation / Job title (See Instructions)		Employer (See Instructions The Granado Group	5)			
				·				

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A			
	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 3/4 Rpt: 6/16		
2	FILER NAME Hispanic Republicans of Texas			3	Filer ID (Ethics Commission 00065957	n Filers)	
4	Date 03/27/2024 5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$100.00		
_	Deignaignal annu	Corpus Christi, TX 78411	O Franklause (Coo la structions				
8	Insurance	pation / Job title (See Instructions)	9 Employer (See Instructions The Granado Group)			
	Date Full name of contributor out-of-state PAC (ID#:) 02/26/2024 Granado, Arturo Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
		Corpus Christi, TX 78411					
Principal occupation / Job title (See Instructions) Insurance Employer (See Instruction The Granado Group)					
	Date 03/08/2024	Full name of contributor out-of-state PAC (ID#:_ HOME-PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00	
		Houston, TX 77064					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 05/29/2024	Full name of contributor out-of-state PAC (ID#:_Pannell, Jeff Contributor address; City; State; Zip Code Southlake, TX 76092			Amount of Contribution (\$)	\$100.00	
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions retired)			
	Date 06/17/2024	Full name of contributor out-of-state PAC (ID#:_ Ventura Jr, Jose G Contributor address; City; State; Zip Code San Antonio, TX 78260)		Amount of Contribution (\$)	\$50.00	
	Principal occu retired	pation / Job title (See Instructions)	Employer (See Instructions retired)			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/4 Rpt: 7/16			
2	FILER NAME Hispanic Re	publicans of Texas		3	Filer ID (Ethics Commission 00065957	ı Filers)		
4	Date 05/17/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$50.00		
		San Antonio, TX 78260						
8	Principal occu retired	upation / Job title (See Instructions)	9 Employer (See Instructions retired	s)				
	Date Full name of contributor out-of-state PAC (ID#:) 04/20/2024 Ventura Jr, Jose G Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$50.00			
	Principal occu	San Antonio, TX 78260 upation / Job title (See Instructions)	Employer (See Instructions retired	<u> </u> s)				
	Date 03/24/2024	Full name of contributor out-of-state PAC (ID#:_ Ventura Jr, Jose G Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
		San Antonio, TX 78260						
	Principal occu retired	upation / Job title (See Instructions)	Employer (See Instructions retired	s)				
	Date 02/25/2024	Full name of contributor out-of-state PAC (ID#:_ Ventura Jr, Jose G Contributor address; City; State; Zip Code San Antonio, TX 78260)		Amount of Contribution (\$)	\$50.00		
	Principal occuretired	upation / Job title (See Instructions)	Employer (See Instructions retired	<u>1</u> S)				

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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 1/9 Rpt: 8/16	2 FILER NAME Hispanic Republicans of Texas 3 Filer ID (Ethics Commission Filers) 00065957
4 Date 03/04/2024	5 Payee name Alameda Restaurant
6 Amount (\$) \$734.89	7 Payee address; City; State; Zip Code 102 W Edinburg Avenue
Expenditure from corporate funds	Elsa, TX 78543
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense HRT Grassroots Event
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date 06/29/2024	Payee name Anedot
Amount (\$) \$4.30	Payee address; City; State; Zip Code PO Box 84314, Ste F
Expenditure from corporate funds	Baton Rouge, LA 70884
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 06/27/2024	Payee name Anedot
Amount (\$) \$4.30	Payee address; City; State; Zip Code PO Box 84314, Ste F
Expenditure from corporate funds	Baton Rouge, LA 70884
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense credit card fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense 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: Sch: 2/9 Rpt: 9/16	2 FILER NAME Hispanic Republicans of Texas 3 Filer ID (Ethics Commission Filers) 00065957
4 Date	5 Payee name
06/17/2024	Anedot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2.30	PO Box 84314, Ste F
,	
Expenditure from	
corporate funds	Baton Rouge, LA 70884
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Categories listed at the top of this scriedule) Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	credit card fees
	0.00.00
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payea nama
	Payee name
05/29/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$4.30	PO Box 84314, Ste F
Ψ4.00	1 O BOX 04014, Ote 1
Expenditure from	
corporate funds	Baton Rouge, LA 70884
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	credit card fees
	Credit Card rees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Data	
Date	Payee name
05/29/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$4.30	PO Box 84314, Ste F
Ψ4.30	1 0 000 0-01-1, 010 1
Expenditure from	
corporate funds	Baton Rouge, LA 70884
PURPOSE	(a) Category (a. C.
OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Fees Check if travel outside of Lexas. Complete Schedule 1. Check if Austin, TX, officeholder living expense
	credit card fees
	Greuit Card rees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 3/9 Rpt: 10/16	Hispanic Republicans of Texas	00065957
4 Date	5 Payee name	'
05/27/2024	Anedot	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$4.30	PO Box 84314, Ste F	
Expenditure from corporate funds	Baton Rouge, LA 70884	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		credit card fees
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI		91100 11010
Date	Davisa sama	
05/17/2024	Payee name Anedot	
Amount (\$)	Payee address; City; State; Zip Co	de
\$2.30	PO Box 84314, Ste F	
Expenditure from		
corporate funds	Baton Rouge, LA 70884	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		credit card fees
Operation ONE Wife discont	Oscalidate IOW sales Islanda and Sales	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sould	ght Office held
'		
Date	Payee name	
04/29/2024	Anedot	
Amount (\$)	Payee address; City; State; Zip Co	de
\$2.30	PO Box 84314, Ste F	
Expenditure from corporate funds	Baton Rouge, LA 70884	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		credit card fees
Occupation Children	Condidate (Office halden as	Off.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sould	ght Office held
,		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I 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: 4/9 Rpt: 11/16	Hispanic Republicans of Texas 00065957
4 Date	5 Payee name
04/29/2024	Anedot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4.30	PO Box 84314, Ste F
— Foreseditors from	
Expenditure from corporate funds	Baton Rouge, LA 70884
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense credit card fees
	Great Gara rees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
04/27/2024	Anedot
Amount (\$)	
\$4.30	PO Box 84314, Ste F
Expenditure from	
corporate funds	Baton Rouge, LA 70884
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense credit card fees
	cieuit caru lees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	
Date 04/20/2024	Payee name Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$2.30	PO Box 84314, Ste F
Expenditure from	
corporate funds	Baton Rouge, LA 70884
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense credit card fees
	Great Gara rees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

	Candidate/Officeholder/Politica			ng Exper ies/Wage	es/Contract Labor OTHER (enter a category not listed above)
	Credit Card Payment		The Instruction Guide explains how to	o comp	olete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 5/9 Rpt: 12/16		Hispanic Republicans of Texas		00065957
4	Date	5	Payee name		
	03/29/2024		Anedot		
6	Amount (\$)	7	Payee address; City; State; Zip	Code	9
	\$4.30		PO Box 84314, Ste F		
	- Constantituus faans				
	Expenditure from corporate funds		Baton Rouge, LA 70884		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	D) Description
	OF EXPENDITURE	` '	Fees		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE				Check if Austin, TX, officeholder living expense
					credit card fees
_					
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office	sought	t Office held
	Date		Payee name		
	03/27/2024		Anedot		
	Amount (\$)		Payee address; City; State; Zip	Code	3
	\$4.30		PO Box 84314, Ste F		
	"				
	Expenditure from corporate funds		Baton Rouge, LA 70884		
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description Check if traval outside of Taylor Complete Schoolule T
	EXPENDITURE		Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					credit card fees
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office	sought	t Office held
	Date		Payee name		
	03/24/2024		Anedot		
	Amount (\$)		Payee address; City; State; Zip	Code	
	\$2.30		PO Box 84314, Ste F		
	Expenditure from corporate funds		Baton Rouge, LA 70884		
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE		Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					credit card fees
	Complete ONLY if direct		Candidate/Officeholder name Office	sought	office held
	expenditure to benefit C/O			J	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I 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: 6/9 Rpt: 13/16	Hispanic Republicans of Texas 00065957
4 Date	5 Payee name
02/29/2024	Anedot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4.30	PO Box 84314, Ste F
Expenditure from corporate funds	Baton Rouge, LA 70884
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense credit card fees
	Credit Card rees
O Commission Chilly W. F.	Open Highest (Office health a group of the seconds)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/26/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$4.30	PO Box 84314, Ste F
*	
Expenditure from	Dates Davis I A 70004
corporate funds	Baton Rouge, LA 70884
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense credit card fees
	Credit Card rees
Operation ONLY if alice at	Open Highest (Office health and a second to the second to
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/25/2024	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$2.30	PO Box 84314, Ste F
, 55	
Expenditure from corporate funds	Baton Rouge, LA 70884
·	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	credit card fees
	Great data rees
Complete CNII V if direct	Candidata/Officeholder name Office county Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
p = 1 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

	Candidate/Officeholder/Politica Credit Card Payment		nittee L	egal Services			ages	/Contract Labor		OTHER (enter	a category not listed a	bove)
	·			The Instruction G	uide explains	s how to cor	mple	ete this form.	_			
1	Total pages Schedule F1:	2 F	ILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 7/9 Rpt: 14/16	Н	lispanic Rep	oublicans of T	exas					00065957		
4	Date	5 P	ayee name									
	02/29/2024	F	rost Bank									
6	Amount (\$)	7 P	ayee address	s; City;	State	e; Zip Co	de					
	\$5.00	3	525 Far We	st Blvd								
	Expenditure from corporate funds	A	ustin, TX 78	3731								
8	PURPOSE	(a) C	ategory (see	Categories listed at	the ten of this se	-hodulo)	(b)	Description				
	OF		ees	Categories listed at	the top of this sci	nedule)	(- ,	_ `	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE							Check if Austin,	, TX,	officeholder livin	g expense	
								Bank Fee				
9	Complete ONLY if direct		ndidate/Office	eholder name		Office sou	ght			Office h	eld	
	expenditure to benefit C/O	H										
	Date	Р	ayee name									
	03/29/2024	F	rost Bank									
	Amount (\$)	Р	ayee address	s; City;	State	e; Zip Co	de					
	\$15.00	3	525 Far We	st Blvd								
	Expenditure from corporate funds	A	ustin, TX 78	3731								
	PURPOSE	(a) C	ategory (See	Categories listed at	the top of this sc	hedule)	(b)	Description				
OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees					Check if travel of	outsi	de of Texas. Cor	nplete Schedule T.		
	LAFENDITORE							_	, TX,	officeholder livin	g expense	
								Bank Fee				
		<u> </u>										
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ndidate/Offic	eholder name	1	Office sou	ght			Office h	eld	
	Date	l	ayee name									
	04/30/2024	F	rost Bank									
	Amount (\$)	P	ayee address	s; City;	State	e; Zip Co	de					
	\$15.00	3	525 Far We	st Blvd								
_	Expenditure from											
	corporate funds	A	ustin, TX 78	3731								
	PURPOSE	(a) C	ategory (See	Categories listed at	the top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		ees	-	·			Check if travel of	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITORE							—	, TX,	officeholder livin	g expense	
								Bank Fee				
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH												
	·											
l												

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)

al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Hispanic Republicans of Texas 00065957
5 Payee name
Frost Bank
7 Payee address; City; State; Zip Code
3525 Far West Blvd
Austin, TX 78731
(a) Category (See Categories listed at the top of this schedule) (b) Description
Fees Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense Bank Fee
Bankree
Candidate/Officeholder name Office sought Office held
H
Т _
Payee name
Frost Bank
Payee address; City; State; Zip Code
3525 Far West Blvd
Austin, TX 78731
(a) Category (See Categories listed at the top of this schedule) (b) Description
Fees Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense
Bank Fee
Condidate/Office helder name
Candidate/Officeholder name Office sought Office held H
Payee name
MailChimp
Payee address; City; State; Zip Code
675 Ponce de Leon Ave NE
Suite 5000
Atlanta, GA 30308
(a) Category (See Categories listed at the top of this schedule) (b) Description
(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Office Overhead/Rental Expense
Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PAC Email System
Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PAC Email System Candidate/Officeholder name Office sought Office held
Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PAC Email System
Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PAC Email System Candidate/Officeholder name Office sought Office held

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I 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: 9/9 Rpt: 16/16	Hispanic Republicans of Texas 00065957									
4 Date	5 Payee name									
03/05/2024	Pyrix									
6 Amount (\$)	7 Payee address; City; State; Zip Code									
\$1.08	995 Market Street									
	2nd Floor									
Expenditure from corporate funds	San Francisco, CA 94103									
8 PURPOSE										
OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.									
EXPENDITURE	Check if Austin, TX, officeholder living expense									
	credit card processing									
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held									
expenditure to benefit C/OI	1									
Date	Payee name									
03/08/2024	Reichart, Logan									
Amount (\$)	Payee address; City; State; Zip Code									
\$1,500.00	106 Tehama Place									
Expenditure from corporate funds	Montgomery, TX 77316									
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description									
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.									
	Check if Austin, TX, officeholder living expense Fundraising Consulting									
	Fundraising Consulting									
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held									
expenditure to benefit C/OI										
Date	Payee name									
03/12/2024	Rio Grande Valley Republican Women									
Amount (\$)	Payee address; City; State; Zip Code									
\$500.00	4900 North 23rd Street									
Φ00.00	4300 Notul 2314 311661									
Expenditure from corporate funds	McAllen, TX 78504									
PURPOSE	1									
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.									
EXPENDITURE	Check if Austin, TX, officeholder living expense									
	Event Sponsorship									
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held									
expenditure to benefit C/OH										