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) 00069233 3 COMMITTEE NAME **OFFICE USE ONLY** Hochheim Prairie Political Action Committee Date Received **ELECTRONICALLY FILED** 07/26/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 500 U.S. Hwy. 77A S. Change of Address Yoakum, TX 77995-1399 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Mr. David T. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Weber CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE TREASURER 500 U.S. Hwy 77A S. STREET **ADDRESS** (Residence or Business) Yoakum, TX 77995-1399 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 500 U.S. Hwy 77A South MAILING **ADDRESS** Change of Address Yoakum, TX 77995-1399 AREA CODE **CAMPAIGN** PHONE NUMBER **EXTENSION TREASURER PHONE** (361) 293-1021 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 X August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 06/26/2024 07/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME			13 Fil	er ID	(Ethics Commission Filers)
	litical Action Committee			069233	(======,
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			
		A. Curanantad			
	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.)				
5 CONTRIBUTION		POLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	POLITICAL CONTRIBUTIONS (DR GUARANTEES OF LOANS, C ADE ELECTRONICALLY) qualifies for the higher itemization thres)R	\$	0.00
	2. TOTAL POLITICA			\$	1,200.00
	`	OGES, LOANS, OR GUARANTEE	S OF LOANS)		,
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITICA	_ EXPENDITURES		\$	750.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	ONTRIBUTIONS MAINTAINED A S PERIOD	AS OF THE LAST DAY	\$	20,733.00
OUTSTANDING LOAN TOTALS		MOUNT OF ALL OUTSTANDING REPORTING PERIOD	CLOANS AS OF THE	\$	0.00
6 AFFIDAVIT					
			nder penalty of perjury, t d includes all informatior tion Code.		
			Mr. David T. W	/eber	
			Signature of Campaign		rer
AFFIX NOTA	RY STAMP / SEAL ABOVE				
Curer to and aubacrib	and hafara ma butha asid		this the		dov
		hich, witness my hand and seal o			day
-		,			
Signature of officer	administering oath	Printed name of officer administer	ing oath Tit	le of offic	er administering oath

SUBTOTALS - MPAC

FORM MPAC **COVER SHEET PG 3**

					3 01 13
		EE NAME	18 Filer ID	(Ethi	cs Commission Filers)
Ho	chheim	Prairie Political Action Committee	00069233		
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,200.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.		\$			
5.		\$			
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.	Х	SCHEDULE E: LOANS		\$	0.00
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	750.00
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL (CONTRIBUTIO	JNS		SCHEDULE	E A1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/9 Rpt: 4/15	
2	FILER NAME Hochheim P	rairie Political Action Committ	ee		3	Filer ID (Ethics Commission 00069233	ı Filers)
4	Date 06/27/2024	5 Full name of contributor Brewer, Lynn6 Contributor address; City; St			7	Amount of Contribution (\$)	\$90.00
		Yoakum, TX 77995					
8	Principal occu Vice Preside	pation / Job title (See Instructions ent	5)	9 Employer (See Instructions Hochheim Prairie Insura		e	
	Date 07/11/2024	Full name of contributor Brewer, Lynn Contributor address; City; S				Amount of Contribution (\$)	\$90.00
	Principal occu	Yoakum, TX 77995 pation / Job title (See Instructions	5)	Employer (See Instructions	(5)		
	Vice Preside		s)	Hochheim Prairie Insura		e	
	Date 07/25/2024	Full name of contributor Brewer, Lynn Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$90.00
		Yoakum, TX 77995					
	Principal occu Vice Preside	pation / Job title (See Instructions ent	s)	Employer (See Instructions Hochheim Prairie Insura		e	
	Date 06/27/2024	Full name of contributor Bridges, Jimmy Contributor address; City; S				Amount of Contribution (\$)	\$25.00
	•	Lubbock, TX 79424 pation / Job title (See Instructions epresentative	5)	Employer (See Instructions Hochheim Prairie Insura		e	
	Date 07/11/2024	Full name of contributor Bridges, Jimmy				Amount of Contribution (\$)	\$25.00
		Lubbock, TX 79424					
		pation / Job title (See Instructions epresentative	6)	Employer (See Instructions Hochheim Prairie Insura		e	

	MONET	ARY POLITICAL C	ONTRIBUTIO	JNS	SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A1: Sch: 2/9 Rpt: 5/15	
2	FILER NAME Hochheim P	rairie Political Action Committo	ee		3 Filer ID (Ethics Commission F 00069233	ilers)
4	Date 07/25/2024	5 Full name of contributor Bridges, Jimmy6 Contributor address; City; St)	7 Amount of Contribution (\$)	\$25.00
		Lubbock, TX 79424		<u> </u>		
8		pation / Job title (See Instructions epresentative	s)	Employer (See Instructions Hochheim Prairie Insura	ance	
	Date 06/27/2024	Full name of contributor Caldwell, Matthew (Mr.) Contributor address; City; St	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	\$5.00
	Principal occu	Chriesman, TX 77838 pation / Job title (See Instructions	s)	Employer (See Instructions	5)	
	Claims Repr	esentative		Hochheim Prairie Insura	ance	
	Date 07/11/2024	Full name of contributor Caldwell, Matthew (Mr.) Contributor address; City; St Chriesman, TX 77838)	Amount of Contribution (\$)	\$5.00
H	Principal occu	pation / Job title (See Instructions	(3)	Employer (See Instructions	<u> </u> 6)	
	Claims Repr		,	Hochheim Prairie Insura		
	Date 07/25/2024	Contributor address; City; St			Amount of Contribution (\$)	\$5.00
	Principal occu Claims Repr	Chriesman, TX 77838 pation / Job title (See Instructions esentative	s)	Employer (See Instructions Hochheim Prairie Insura	•	
	Date 06/27/2024	Full name of contributor Gearson, Tracey Contributor address; City; St Yoakum, TX 77995	out-of-state PAC (ID#:_ mate; Zip Code		Amount of Contribution (\$)	\$10.00
	Principal occu Underwriter	pation / Job title (See Instructions	s)	Employer (See Instructions Hochheim Prairie Insura		
				<u>I</u>		

	MONEI	ARY POLITICAL CO	NIRIBUTION	S	SCHED	OULE A1
	The Instru	ction Guide explains how to	complete this forr	m.	1 Total pages Schedule A1 Sch: 3/9 Rpt: 6/15	L:
2	FILER NAME				3 Filer ID (Ethics Commis	ssion Filers)
	Hochheim P	rairie Political Action Committee			00069233	
4	Date 07/11/2024	5 Full name of contributor Gearson, Tracey6 Contributor address; City; State	out-of-state PAC (ID#: ; Zip Code)	7 Amount of Contribution (\$) \$10.00
		Yoakum, TX 77995				
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	S)	
	Underwriter			Hochheim Prairie Insura	ance	
	Date 07/25/2024	Full name of contributor Gearson, Tracey Contributor address; City; State	out-of-state PAC (ID#:)	Amount of Contribution (\$10.00
		Yoakum, TX 77995				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)	
	Underwriter			Hochheim Prairie Insura	ance	
	Date 06/27/2024	Full name of contributor Gloor, Carol Contributor address; City; State	out-of-state PAC (ID#:)	Amount of Contribution (\$20.00
		Shiner, TX 77984				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	S)	
	•	eting Coordinator		Hochheim Prairie Insura		
	Date 07/11/2024	Full name of contributor Gloor, Carol Contributor address; City; State Shiner, TX 77984	out-of-state PAC (ID#:		Amount of Contribution (\$20.00
	•	pation / Job title (See Instructions) eting Coordinator		Employer (See Instructions Hochheim Prairie Insura		
	Date 07/25/2024	Full name of contributor Gloor, Carol Contributor address; City; State Shiner, TX 77984	out-of-state PAC (ID#:		Amount of Contribution (\$20.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	S)	
	Senior Marke	eting Coordinator		Hochheim Prairie Insura	ance	

	MONEI	ARY POLITICAL (CONTRIBUTION	JNS		SCHEDULE	A1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/9 Rpt: 7/15	
2	FILER NAME Hochheim P	rairie Political Action Committ	ee		3	Filer ID (Ethics Commission 00069233	Filers)
4	Date 06/27/2024	5 Full name of contributor Jank, Mitchell6 Contributor address; City; S)	7	Amount of Contribution (\$)	\$5.00
		Meyersville, TX 77974					
8	Principal occu	pation / Job title (See Instructions	s)	9 Employer (See Instructions			
	Underwriter			Hochheim Prairie Insura	anc	е	
	Date 07/11/2024	Full name of contributor Jank, Mitchell Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$5.00
		Meyersville, TX 77974					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Underwriter			Hochheim Prairie Insura	anc	е	
	Date 07/25/2024	Full name of contributor Jank, Mitchell Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$5.00
		Meyersville, TX 77974					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Underwriter		•	Hochheim Prairie Insura	-	е	
	Date 06/27/2024	Contributor address; City; S				Amount of Contribution (\$)	\$10.00
		Yoakum, TX 77995		I = 1	Ĺ		
	Financial Ac	pation / Job title (See Instructions countant	5)	Employer (See Instructions Hochheim Prairie Insura		е	
	Date 07/11/2024	Full name of contributor Knezek, Kathy Contributor address; City; S Yoakum, TX 77995	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$10.00
	Principal occu	I pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Financial Ac			Hochheim Prairie Insura		е	
	Financial Ac	countant		Hocnneim Prairie Insura	anc	e	

	MONET	ARY POLITICAL (JONTRIBUTIO	JN3		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/9 Rpt: 8/15	
2	FILER NAME Hochheim P	rairie Political Action Committ	ee		3	Filer ID (Ethics Commission 00069233	Filers)
4	Date 07/25/2024	5 Full name of contributor Knezek, Kathy6 Contributor address; City; St			7	Amount of Contribution (\$)	\$10.00
		Yoakum, TX 77995					
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	s)		
	Financial Ac	countant		Hochheim Prairie Insura	anc	e	
	Date 06/27/2024	Full name of contributor Miculka, Eric (Mr.) Contributor address; City; Si				Amount of Contribution (\$)	\$10.00
		Yoakum, TX 77995					
		pation / Job title (See Instructions	5)	Employer (See Instructions			
	Insurance D	ata Analyst		Hochheim Prairie Insura	anc	e	
	Date 07/11/2024	Full name of contributor Miculka, Eric (Mr.) Contributor address; City; Si				Amount of Contribution (\$)	\$10.00
		Yoakum, TX 77995					
		pation / Job title (See Instructions	5)	Employer (See Instructions	-		
	Insurance Da	ata Analyst		Hochheim Prairie Insura	anc	e 	
	Date 07/25/2024	Full name of contributor Miculka, Eric (Mr.) Contributor address; City; St Yoakum, TX 77995				Amount of Contribution (\$)	\$10.00
	Principal occu Insurance Da	pation / Job title (See Instructions ata Analyst	5)	Employer (See Instructions Hochheim Prairie Insura		e	
	Date 06/27/2024	Full name of contributor Ressler, Shelley Contributor address; City; St	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions	<u> </u>	Employer (See Instructions	S)		
	Marketing Co		-,	Hochheim Prairie Insura		e	
				1			

	MONEI	ARY POLITICAL (CONTRIBUTION	JNS		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this f	form.	1	Total pages Schedule A1: Sch: 6/9 Rpt: 9/15	
2	FILER NAME Hochheim P	rairie Political Action Committ	ee		3	Filer ID (Ethics Commission 00069233	Filers)
4	Date 07/11/2024	Full name of contributor Ressler, ShelleyContributor address; City; St			7	Amount of Contribution (\$)	\$5.00
		Yoakum, TX 77995					
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	s)		
	Marketing C	oordinator		Hochheim Prairie Insura	anc	е	
	Date 07/25/2024	Full name of contributor Ressler, Shelley Contributor address; City; St	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$5.00
		Yoakum, TX 77995					
		pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Marketing C	oordinator		Hochheim Prairie Insura	anc	е	
	Date 06/27/2024	Full name of contributor Staton, Carrie Contributor address; City; Si	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$10.00
		Lockhart, TX 78644					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	s)		
	Marketing R	epresentative		Hochheim Prairie Insura	anc	е	
	Date 07/11/2024	Full name of contributor Staton, Carrie Contributor address; City; Staton				Amount of Contribution (\$)	\$10.00
	Dringing coou	pation / Job title (See Instructions	<u>, , , , , , , , , , , , , , , , , , , </u>	Employer (See Instructions	<u>~/</u>		
	•	epresentative	o)	Employer (See Instructions Hochheim Prairie Insura		e	
	Date 07/25/2024	Full name of contributor Staton, Carrie Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Dringinal age:		2)	Employer (See Instruction	e,		
		pation / Job title (See Instructions epresentative) 	Employer (See Instructions Hochheim Prairie Insura		e	

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS	SCHEDULE A	1
	The Instru	ction Guide explains how	to complete this fo	rm.	1 Total pages Schedule A1: Sch: 7/9 Rpt: 10/15	
2	FILER NAME Hochheim P	rairie Political Action Committe	e		3 Filer ID (Ethics Commission Filer 00069233	rs)
1	Date	5 Full name of contributor Γ	out-of-state PAC (ID#:	1	7 Amount of Contribution (\$)	
•	06/27/2024	Stewart, Donna 6 Contributor address; City; Sta				10.00
		Edna, TX 77957				
8		pation / Job title (See Instructions)	9	Employer (See Instructions		
	Claim Repre	sentative		Hochheim Prairie Insura	rance	
	Date 07/11/2024	Full name of contributor [Stewart, Donna Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)	Amount of Contribution (\$)	10.00
		Edna, TX 77957				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ns)	
	Claim Repre	sentative		Hochheim Prairie Insura	rance	
	Date 07/25/2024	Full name of contributor [Stewart, Donna Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)	Amount of Contribution (\$) \$:	10.00
		Edna, TX 77957				
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ns)	
	Claim Repre			Hochheim Prairie Insura	,	
	Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)	
	06/27/2024	Tate, Barry Contributor address; City; Sta				\$3.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ns)	
	Claim Repre	sentative		Hochheim Prairie Insura	rance	
	Date 07/11/2024	Full name of contributor [Tate, Barry	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$3.00
		Contributor address; City; Sta	te; Zip Code			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ns)	
	Claim Repre	sentative		Hochheim Prairie Insura	rance	
			,			

	MONEI	ARY POLITICAL C	ONTRIBUTION	15		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 11/15	
2	FILER NAME Hochheim P	rairie Political Action Committe	e		3	Filer ID (Ethics Commission 00069233	n Filers)
4	Date 07/25/2024	Full name of contributor Tate, Barry Contributor address; City; Sta	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$3.00
		Iowa Park, TX 76367					
8	Claim Repre			Employer (See Instructions Hochheim Prairie Insura			
	Date 06/27/2024	Full name of contributor Taylor, Kim Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu	Yoakum, TX 77995 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Manager			Hochheim Prairie Insura		e	
	Date 07/11/2024	Full name of contributor Taylor, Kim Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Yoakum, TX 77995					
	Principal occu Manager	pation / Job title (See Instructions)		Employer (See Instructions Hochheim Prairie Insura		e	
	Date 07/25/2024	Full name of contributor Taylor, Kim Contributor address; City; Sta Yoakum, TX 77995	out-of-state PAC (ID#: tte; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu Manager	pation / Job title (See Instructions)		Employer (See Instructions Hochheim Prairie Insura		e	
	Date 06/27/2024	Full name of contributor Weber, David Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$167.00
	Principal occu General Cou	pation / Job title (See Instructions) Insel		Employer (See Instructions Hochheim Prairie Insura		e	
			·				

	MONEI	ARY POLITICAL C	ONTRIBUTION	15		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 9/9 Rpt: 12/15	
2	FILER NAME	weinie Delitical Action Committee	_		3	Filer ID (Ethics Commission	n Filers)
		rairie Political Action Committe	_			00069233	
4	Date 07/11/2024	5 Full name of contributorWeber, David6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$167.00
		Victoria, TX 77904					
8		pation / Job title (See Instructions)	9	Employer (See Instructions			
	General Cou	ınsel		Hochheim Prairie Insura	ance	9	
	Date 07/25/2024	Full name of contributor Weber, David Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code			Amount of Contribution (\$)	\$167.00
		Victoria, TX 77904	1		<u></u>		
	General Cou	pation / Job title (See Instructions)		Employer (See Instructions			
	General Cou			Hochheim Prairie Insura	ance		
	Date 06/27/2024	Full name of contributor Wilson, Christopher Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
		Yoakum, TX 77995					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Underwriter			Hochheim Prairie Insura	ance	9	
	Date 07/11/2024	Full name of contributor Wilson, Christopher Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
	Principal occu Underwriter	pation / Job title (See Instructions)		Employer (See Instructions Hochheim Prairie Insura		9	
	Date 07/25/2024	Full name of contributor Wilson, Christopher Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu Underwriter	pation / Job title (See Instructions)		Employer (See Instructions Hochheim Prairie Insura)	
			·				

PLE	DGED CONTRIBU	TIONS				SCHEDULE B
Т	he Instruction Guide exp	plains how to con	nplete this form.		I pages Sche	
2 FILER NA	AME im Prairie Political Action Cor	nmittee		3 Filer		thics Commission Filers)
<u></u>	OF UNITEMIZED PLEDO			\$		0.00
5 Date	6 Full name of pledgor 7 Pledgor Address;	out-of-state PAC City; State; Zip C			unt of ge (\$)	9 In-kind description (If applicable)
10 Dringing	and which I leb title (Con Instru	national)	11 Employer (See In		eck if travel out	tside of Texas. Complete Schedule
LU Philicipai	Principal occupation / Job title (See Instructions)			structions)		

	LOANS					SCHEDULE E
	The Instruction	on Guide explains how to comp	olete this f	orm.		ges Schedule E: 1 Rpt: 14/15
2	FILER NAME Hochheim Prairi	e Political Action Committee		3 Filer ID (Ethics Commission Filers) 00069233		
4	TOTAL OF UN	IITEMIZED LOANS				\$ 0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:)	9 Loan Amount (\$)
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Rate
						11 Maturity Date
12	12 Principal occupation / Job title (See Instructions)			13 Employer (See Instru	ictions)	,
14	Description of Collateral None			15 Check if personal funds were deposited into political account (See Instructions)		
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
	not applicable	18 Guarantor address; City;	State;	Zip Code		
20 Principal occupation			21 Employer (See Instru	ictions)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	3y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District Cal 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: 1/1 Rpt: 15/15	Hochheim Prairie Political Action Committee 00069233
4 Date	5 Payee name
06/26/2024	Chris Turner Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$750.00	P.O. Box 182093
Expenditure from	
corporate funds	Arlington, TX 76096
8 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
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/C)H