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) 00080140 3 COMMITTEE NAME **OFFICE USE ONLY** Latino Texas PAC Date Received **ELECTRONICALLY FILED** 09/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 150 W. Parker Rd., 3rd Fl. Change of Address Houston, TX 77076 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Daniel N. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Ramirez CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 150 W. Parker Rd., 3rd Fl. STREET **ADDRESS** (Residence or Business) Houston, TX 77076 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 150 W. Parker Rd., 3rd Fl. MAILING **ADDRESS** Change of Address Houston, TX 77076 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 922-6264 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 August 5 November 5 X September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 07/26/2024 08/25/2024 **GO TO PAGE 2**

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer	ID (Ethics Commission Filers)		
Latino Texas PAC			0008	30140		
14 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	A. Supported				
	(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.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAI OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	N	\$ 0.00		
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 480.25		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$ 0.00		
	4. TOTAL POLITICA	L EXPENDITURES		\$ 2.00		
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 7,738.05			
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		OF THE	\$ 0.00		
16 AFFIDAVIT	<u> </u>					
		I swear, or affirm, under penalty of true and correct and includes all under Title 15, Election Code.				
		Mr. Da	aniel N. Ran	mirez		
		Signature o	of Campaign	Treasurer		
AFFIX NOTAR	Y STAMP / SEAL ABOVE					
Sworn to and subscribe	d before me. by the said		, this the	day		
	Sworn to and subscribed before me, by the said, this the day of, 20, to certify which, witness my hand and seal of office.					
Signature of officer a	dministering oath	Printed name of officer administering oath	Title	of officer administering oath		

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

					3 of 5
		EE NAME (as PAC	18 Filer ID 00080140	(Ethics Comm	nission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE					ΓAL AMOUNT
1.	X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			\$	480.25
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			\$	
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	2.00
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	
				1	

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/5
2	FILER NAME Latino Texas PAC	3 Filer ID (Ethics Commission Filers) 00080140
4	Date 07/29/2024 5 Full name of contributor out-of-state PAC (ID#:) ActBlue Texas 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$480.2
Ω	Somerville, MA 02144 Principal occupation / Job title (See Instructions) 9 Employer (See Instruct	ione)

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 B Candidate/Officeholder/Politic Credit Card Payment		ting Expense Travel Out of District aries/Wages/Contract Labor OTHER (enter a category not listed above) to complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 5/5	Latino Texas PAC	00080140
4 Date	5 Payee name	
07/31/2024	Amegy Bank	
6 Amount (\$) \$2.00	7 Payee address; City; State; Zi 2105 Taylor St.) Code
Expenditure from corporate funds	Houston, TX 77007	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule	
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Paper statement fee.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office	e sought Office held
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