#### 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) 00070096 3 COMMITTEE NAME **OFFICE USE ONLY** Bosque Democratic Club Date Received **ELECTRONICALLY FILED** 09/05/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 291 Change of Address Meridian, TX 76665 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Albert NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Hunter CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** PO Box 291 STREET **ADDRESS** (Residence or Business) Meridian, TX 76665 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** PO Box 291 MAILING **ADDRESS** Change of Address Meridian, TX 76665 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (254) 366-8439 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

## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME Bosque Democratic Club  14 COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  15 CONTRIBUTION  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN)	ssion Filers)
ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  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. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN)	
ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  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.)  5. CONTRIBUTION  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN)	
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(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.)  5. CONTRIBUTION  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN	
(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.)  5. CONTRIBUTION  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN	
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Assisted (Identify by name or, if applicable, classify by party.)  5 CONTRIBUTION  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN	
TOTALS  PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)  check here if this report qualifies for the higher itemization threshold	0.00
2. TOTAL POLITICAL CONTRIBUTIONS	
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	123.00
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS \$	0.00
4. TOTAL POLITICAL EXPENDITURES \$	0.00
CONTRIBUTION BALANCE  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  \$	6,203.94
OUTSTANDING LOAN TOTALS  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD  \$	0.00
6 AFFIDAVIT	
I swear, or affirm, under penalty of perjury, that the accompanying retrue and correct and includes all information required to be reported under Title 15, Election Code.	eport is by me
Mr. Albert Hunter	
Signature of Campaign Treasurer	
AFFIX NOTARY STAMP / SEAL ABOVE	
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 administering oath Printed name of officer administering oath Title of officer administering	

### **SUBTOTALS - MPAC**

### FORM MPAC **COVER SHEET PG 3**

3 of 6							
17 COMMITTEE NAME 18 Filer ID (Ethics Commission Filers)							
Bosque Democratic Club 00070096							
19 SCHEDU NAME O	SUBTOTAL AMO	DUNT					
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	123.00			
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00				
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00				
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION						
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	\$					
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$				
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$					
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION						
9. X	SCHEDULE E: LOANS		\$	0.00			
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	0.00			
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00			
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00			
13. X	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 TO FILER	RETURNED	\$				
			•				

The Instruction Guide explains now to complete this form.  2 FILER NAME Bosque Democratic Club  4 Date 08/18/2024  5 Full name of contributor out-of-state PAC (ID#: ) cash, cash 6 Contributor address; City; State; Zip Code  Meridian, TX 76665	SCHEDULE A1
2 FILER NAME Bosque Democratic Club  4 Date 08/18/2024  6 Contributor address; City; State; Zip Code  Meridian, TX 76665  7 Amount of  Meridian, TX 76665  9 Employer (See Instructions)	es Schedule A1: Rpt: 4/6
08/18/2024 cash, cash 6 Contributor address; City; State; Zip Code  Meridian, TX 76665  8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)	(Ethics Commission Filers)
8 Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)	of Contribution (\$) \$123.00
retired retired	

PLEDGED CONTRIBUTIONS			SCHEDULE	В
The Instruction Guide explains how to complete this form.		Total pages Sched Sch: 1/1 Rpt: 5/0		
2 FILER NAME Bosque Democratic Club	F		ics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES	\$	<b>B</b>		0.00
5 Date 6 Full name of pledgorout-of-state PAC (ID#:) 8  7 Pledgor Address; City; State; Zip Code	p	Amount of oledge (\$)	9 In-kind description (If applicable)	
		Check if travel outsi	ide of Texas. Complete Sche	dule T.
10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)	ions	s)		

	LOANS						SCHED	ULE E
	The Instruction Guide explains how to complete this form					ges Schedule E: L Rpt: 6/6		
2	2 FILER NAME Bosque Democratic Club				3 Filer ID (Ethics Commission Filers) 00070096			
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	
							<b>11</b> Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Ins	tructions)			
14	Description of Coll	ateral		15 Check if personal	funds were d	eposited	into political accou (See Instruction	
16	GUARANTOR INFORMATION	17 Name of guarantor					19 Amount Guara	nteed (\$)
	not applicable	<b>18</b> Guarantor address; City;	State;	Zip Code				
20	Principal occupation	on		21 Employer (See Ins	tructions)			