## MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM MPAC **COVER SHEET PG 1**

| The MPAC Instruction Guide explains how to complete this form.<br>1 Filer ID<br>(Ethics Commission Filers)<br>00015657 |                           |                                    |                         | 2 Total pages filed:<br>5              |  |
|--|---------------------------|------------------------------------|-------------------------|--|--|
| 3  | COMMITTEE NAME            |                                    |                         | OFFICE USE ONLY                        |  |
|  | San Antonio Builde        | ers PAC I                          |                         |  |  |
|  |                           |                                    |                         |  |  |
|  |                           |                                    |                         |  |  |
| L  |                           |                                    |                         | 09/06/2024                             |  |
| 4  | COMMITTEE<br>ADDRESS      | ADDRESS / PO BOX; APT / SUITE #;   | CITY; STATE; ZIP        |  |  |
|  | ADDITESS                  | 3625 Paesanos Pkwy                 |                         |  |  |
|  |                           | Suite 100                          |                         |  |  |
|  | Change of Address         |                                    |                         | Date Hand-delivered or Date Postmarked |  |
| 5  |                           | MS / MRS / MR FIRST                | MI                      |  |  |
|  | TREASURER<br>NAME         | Mr. Ed                             |                         | Receipt # Amount                       |  |
|  |                           |                                    |                         |  |  |
|  |                           | NICKNAME LAST                      | SUFFI                   | Date Processed                         |  |
|  |                           |                                    |                         |  |  |
|  |                           | Berlanga                           |                         | Date Imaged                            |  |
| 6  | CAMPAIGN                  | STREET ADDRESS (NO PO BOX PLEASE); | APT / SUITE #; CITY; ST | ATE: ZIP CODE                          |  |
| ľ  | TREASURER                 | 3625 Paesanos Parkway              |                         |  |  |
|  | STREET<br>ADDRESS         |                                    |                         |  |  |
|  | (Residence or Business)   |                                    |                         |  |  |
|  |                           | San Antonio, TX 78231              |                         |  |  |
| 7  | CAMPAIGN<br>TREASURER     | STREET ADDRESS OR PO BOX;          | APT / SUITE #; CITY; S  | TATE; ZIP CODE                         |  |
|  | MAILING                   | 3625 Paesanos Parkway              |                         |  |  |
|  | ADDRESS                   |                                    |                         |  |  |
|  | Change of Address         | San Antonio, TX 78231              |                         |  |  |
| 8  | CAMPAIGN                  | AREA CODE PHONE NUMBER             | EXTENSION               |  |  |
|  | TREASURER<br>PHONE        | (210) 471-1264                     |                         |  |  |
|  | PHONE (210) 471-1264      |                                    |                         |  |  |
| 9  | REPORT TYPE               | X Monthly                          | 10th day after campaign | Dissolution (Attach PAC-DR)            |  |
|  |                           | Monuny                             | L treasurer termination | Dissolution (Attach PAC-DR)            |  |
| 10   | MONTHLY                   |                                    |                         |  |  |
|  | REPORT FILING<br>DEADLINE | January 5 April                    | 5 July 5                | October 5                              |  |
|  |                           | February 5 May                     | 5 August 5              | November 5                             |  |
|  |                           | March 5 June                       | 2 5 X September 5       | December 5                             |  |
|  |                           |                                    |                         |  |  |
| 11   |                           | Month Day Year                     | THROUGH Month           | Day Year                               |  |
|  | COVERED                   | 07/26/2024                         | 08/25/                  | 2024                                   |  |
|  |                           |                                    |                         |  |  |
|  |                           |                                    |                         |  |  |
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|  |                           |                                    |                         |  |  |
|  |                           |                                    |                         |  |  |
|  | GO TO PAGE 2              |                                    |                         |  |  |
| Fo   | rms provided by Tex       | as Ethics Commission www.et        | thics.state.tx.us       | Version V4.1.0.48da51f7                |  |

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

| 12 COMMITTEE NAME   |   |  | 13 Filer ID    | (Ethics Commission Filers) |
|---|---|--|----------------|----------------------------|
| San Antonio Builders PAC I 0001   |   |  | 00015657       |                            |
|   | 1. Candidates   | A. Supported   |                |                            |
| ACTIVITY  | (Identify by name or, if applicable, classify by party.)            |  |                |                            |
| (Attach lists on plain<br>paper to complete this<br>report if necessary.) |   | B. Opposed   |                |                            |
|   | 2. Measures   | A. Supported   |                |                            |
|   | (Describe by date and location<br>of election and nature of issue.) |  |                |                            |
|   |   | B. Opposed   |                |                            |
|   | 3. Officeholders<br>Assisted  |  |                |                            |
|   | (Identify by name or, if applicable, classify by party.)            |  |                |                            |
| <b>15</b> CONTRIBUTION<br>TOTALS  | PLEDGES, LOANS,<br>CONTRIBUTIONS M                                  | D POLITICAL CONTRIBUTIONS (OTHER THAN<br>OR GUARANTEES OF LOANS, OR<br>ADE ELECTRONICALLY)<br>gualifies for the higher itemization threshold | \$             | 0.00                       |
|   | 2. TOTAL POLITICA   |  | \$             | 0.00                       |
|   | (OTHER THAN PLEI  | DGES, LOANS, OR GUARANTEES OF LOANS)   | Ţ.             | 0.00                       |
| EXPENDITURE<br>TOTALS   | 3. TOTAL UNITEMIZED   | POLITICAL EXPENDITURES   | \$             | 0.00                       |
|   | 4. TOTAL POLITICA   | L EXPENDITURES   | \$             | 0.00                       |
| CONTRIBUTION<br>BALANCE   | 5. TOTAL POLITICAL C<br>OF THE REPORTING                            | CONTRIBUTIONS MAINTAINED AS OF THE LAST<br>G PERIOD  | DAY \$         | 9,670.76                   |
| OUTSTANDING<br>LOAN TOTALS  |   | AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD  | THE \$         | 0.00                       |
| 16 AFFIDAVIT  |   |  |                |                            |
|   |   | I swear, or affirm, under penalty of pe<br>true and correct and includes all infor<br>under Title 15, Election Code.                         |                |                            |
|   |   |  |                |                            |
|   |   |  | Berlanga       |                            |
|   |   | Signature of Ca  | mpaign Treasi  | Irer                       |
| AFFIX NOTARY  | STAMP / SEAL ABOVE  |  |                |                            |
| Sworn to and subscribed before me, by the said, this the,                 |   | his the  | day            |                            |
| of  | , 20, to certify v  | vhich, witness my hand and seal of office.   |                |                            |
|   |   |  |                |                            |
|   |   |  |                |                            |
| Signature of officer ad   | ninistering oath  | Printed name of officer administering oath   | Title of offic | cer administering oath     |
| Forms provided by Texas E   | thics Commission  | www.ethics.state.tx.us   |                | Version V4.1.0.48da51f7    |

#### FORM MPAC COVER SHEET PG 3

3 of 5

| 17 COMMITTEE NAME 18 Filer ID (           |   |  | (Ethics Commission Filers) |                 |      |
|---|---|--|----------------------------|-----------------|------|
| San Antonio Builders PAC I 00015657       |   |  |                            |                 |      |
| 19 SCHEDULE SUBTOTALS<br>NAME OF SCHEDULE |   |  |                            | SUBTOTAL AMOUNT |      |
| NAN                                       |   |  |                            |                 |      |
| 1.  | Х   | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS  |                            | \$              | 0.00 |
| 2.  | Х   | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                          |                            | \$              | 0.00 |
| 3.  | 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 CORPORA<br>LABOR ORGANIZATION | TION OR                    | \$              |      |
| 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 C                        | RGANIZATION                | \$              |      |
| 9.  | Х   | SCHEDULE E: LOANS  |                            | \$              | 0.00 |
| 10.                                       | Х   | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                     | 3                          | \$              | 0.00 |
| 11.                                       | Х   | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   |                            | \$              | 0.00 |
| 12.                                       | Х   | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO                      | DNS                        | \$              | 0.00 |
| 13.                                       | Х   | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  |                            | \$              | 0.00 |
| 14.                                       |   | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO                    | DNS                        | \$              |      |
| 15.                                       |   | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F<br>TO FILER       | RETURNED                   | \$              |      |
|   |   |  |                            | -               |      |
|   |   |  |                            |                 |      |
|   |   |  |                            |                 |      |
|   |   |  |                            |                 |      |
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|   |   |  |                            |                 |      |
|   |   |  |                            |                 |      |
|   |   |  |                            |                 |      |

**SUBTOTALS - MPAC** 

| PLEDGED CONTRIBUTIONS SCHEDULE B   |   |  |  |  |
|--|---|--|--|--|
| The Instruction Guide explains how to complete this form.                                    | 1 Total pages Schedule B:<br>Sch: 1/1 Rpt: 4/5                          |  |  |  |
| 2 FILER NAME<br>San Antonio Builders PAC I   | 3 Filer ID (Ethics Commission Filers)<br>00015657                       |  |  |  |
| <sup>4</sup> TOTAL OF UNITEMIZED PLEDGES   | \$ 0.00   |  |  |  |
| 5 Date 6 Full name of pledgorout-of-state PAC (ID#:)   | 8 Amount of <b>9</b> In-kind description<br>pledge (\$) (If applicable) |  |  |  |
| <b>7</b> Pledgor Address; City; State; Zip Code  |   |  |  |  |
|  | Check if travel outside of Texas. Complete Schedule T.                  |  |  |  |
| <b>10</b> Principal occupation / Job title (See Instructions) <b>11</b> Employer (See Instru | ctions)   |  |  |  |
|  |   |  |  |  |
|  |   |  |  |  |

| LOANS   |                                | SCHED   | DULE E     |
|---|--------------------------------|---|------------|
| The Instruction Guide explains how to complete this form.                               | iges Schedule E:<br>1 Rpt: 5/5 |   |            |
| 2 FILER NAME<br>San Antonio Builders PAC I  | 3 Filer ID<br>000156           | (Ethics Commissi  | on Filers) |
| <sup>4</sup> TOTAL OF UNITEMIZED LOANS  |                                | \$  | 0.00       |
| 5 Date of Ioan 7 Name of lender out-of-state PAC (ID#:                                  | )                              | 9 Loan Amount (   | (\$)       |
| 6 Is lender a 8 Lender address; City; State; Zip Code<br>financial<br>institution?      |                                | <ul><li>10 Interest Rate</li><li>11 Maturity Date</li></ul> |            |
|   |                                |   |            |
| 12 Principal occupation / Job title (See Instructions)   13 Employer (See Instructions) | 5)                             |   |            |
| 14 Description of Collateral   15 Check if personal funds we     None                   | ere deposited                  | l into political accou<br>(See Instructio                   |            |
| Information Information   |                                | 19 Amount Guara   | nteed (\$) |
| not applicable <b>18</b> Guarantor address; City; State; Zip Code                       |                                |   |            |
|   |                                |   |            |
| 20 Principal occupation 21 Employer (See Instructions                                   | 5)                             |   |            |
|   |                                |   |            |
|   |                                |   |            |
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