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) 00086519 3 COMMITTEE NAME **OFFICE USE ONLY Texas Sands PAC** Date Received **ELECTRONICALLY FILED** 10/07/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 111 Congress Ave. Ste. 1400 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78701 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. J. Christopher NAME NICKNAME LAST **SUFFIX** Hughes STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 111 Congress Ave. Ste. 1400 STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 111 Congress Ave. Ste. 1400 MAILING **ADDRESS** Austin, TX 78701 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 417-3475 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) X **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff Year 10 PERIOD Month Day Year Day Month **COVERED THROUGH** 07/01/2024 09/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Runoff Other Primary 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)
Texas Sands PAC			00086519	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported The Honorable Greg Abbott G	Governor	
(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		
	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 MADE ELECTRONICALLY) 1 qualifies for the higher itemization threshold	\$	0.00
		AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	4,500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	274,317.50
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST IG PERIOD	DAY \$	957,395.78
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. J. Christ	opher Hughes	S
		Signature of Ca	ımpaign Treasui	rer
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
Sworn to and subscribe	d before me, by the said _	, t	his 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 offic	er administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 3 of 7

			13 Filer ID (Ethics Commission Filers)
			00086519
Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Christi L. Craddio	ck Railroad Commissioner
	B. Opposed		
2. 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.)			
Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Glenn A. Hegar 3	Ir. Comptroller
	B. Opposed		
2. 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.)			
Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Toni N. Rose Sta	ate Representative
	B. Opposed		
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
	B. Opposed		
Officeholders Assisted (Identify by name or, if			
	2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted 3. Officeholders Assisted 3. Officeholders Assisted	(Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 4. Supported Describe by date and location of election and nature of issue.) 5. Opposed A. Supported Describe by date and location of election and nature of issue.) 6. Opposed B. Opposed Describe by date and location of election and nature of issue.) 7. Measures (Describe by date and location of election and nature of issue.) 8. Opposed B. Opposed Describe by date and location of election and nature of issue.) 8. Opposed B. Opposed Describe by date and location of election and nature of issue.) 8. Opposed B. Opposed B. Opposed B. Opposed	(Identify by name or, if applicable, classify by party.) 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. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 4. Supported The Honorable Glenn A. Hegar of applicable, classify by party.) B. Opposed 5. Opposed 7. Measures (Describe by date and location of election and nature of issue.) B. Opposed 7. Candidates (Identify by name or, if applicable, classify by party.) 8. Opposed 7. Candidates (Identify by name or, if applicable, classify by party.) 8. Opposed 7. Candidates (Identify by name or, if applicable, classify by party.) 9. Opposed 10. Candidates (Identify by name or, if applicable, classify by party.) 11. Candidates (Identify by name or, if applicable, classify by party.) 12. Measures (Describe by date and location of election and nature of issue.) 13. Officeholders (Describe by date and location of election and nature of issue.) 14. Supported (Describe by date and location of election and nature of issue.) 15. Opposed

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

				4 of 7
17 COMMI	ITTE	E NAME	18 Filer ID	(Ethics Commission Filers)
Texas	Sar	nds PAC	00086519	,
19 SCHED) I II F	SURTOTALS		
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
1.	1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			\$
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$	
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$	
6. X	<	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$ 4,500.00
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10. X	<	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 274,317.50
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 TO FILER	RETURNED	\$

MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

The Instruction Guide explains how to complete this form.			1 Total pages Schedule C3: Sch: 1/1 Rpt: 5/7		
	2 FILER NAME Texas Sands PAC		3	Filer ID 00086519	(Ethics Commission Filers)
4 Date 09/26	2024	5 Corporation / Labor Organization name Las Vegas Sands Corp.	6	Amount (\$)	3,000.00
Date 09/26	2024	Corporation / Labor Organization name Las Vegas Sands Corp.		Amount (\$)	1,500.00

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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
TTHER (output a colorograph and listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 6/7	Texas Sands PAC 00086519
4 Date	5 Payee name
08/23/2024	Atchley & Associates, LLP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4,317.50	1005 La Posada Dr
Expenditure from corporate funds	Austin, TX 78752
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	PAC accounting and reporting services
	The accounting and reporting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff of of	•
Date	Payee name
08/29/2024	Christi Craddick Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$15,000.00	3112 Windsor
Ψ13,000.00	
Expenditure from	Suite A, PMB 505
corporate funds	Austin, TX 78703
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payeo namo
09/05/2024	Payee name Glenn Hegar Campaign
09/03/2024	
Amount (\$)	Payee address; City; State; Zip Code
\$100,000.00	815-A Brazos #389
- Foresanditure Cons	
Expenditure from corporate funds	Austin, TX 78701
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1 Total pages Schedule F1: Sch: 2/2 Rpt: 7/7	2 FILER NAME Texas Sands PAC 3 Filer ID (Ethics Commission Filers) 00086519		
4 Date 08/15/2024	5 Payee name Texans for Greg Abbott		
6 Amount (\$) \$150,000.00	7 Payee address; City; State; Zip Code PO Box 308		
Expenditure from corporate funds	Austin, TX 78767		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contribution		
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date 09/24/2024 Amount (\$)	Payee name Toni Rose Campaign Payee address; City; State; Zip Code		
\$5,000.00 Expenditure from corporate funds	P.O. Box 41867 Dallas, TX 75241		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Campaign contribution (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contribution		
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held		