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) 00087384 3 COMMITTEE NAME **OFFICE USE ONLY** Sombrero Advertising & Marketing Date Received **ELECTRONICALLY FILED** 10/01/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 2177 Kennedy Circle Ste. D Change of Address McAllen, TX 78501 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Samuel E. NAME Date Processed **NICKNAME** LAST **SUFFIX** Date Imaged Benson Ш CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER 2205 West Jackson Ave. STREET **ADDRESS** (Residence or Business) McAllen, TX 78501-7244 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 2205 West Jackson Ave. MAILING **ADDRESS** Change of Address McAllen, TX 78501-7244 AREA CODE **CAMPAIGN** PHONE NUMBER **EXTENSION TREASURER PHONE** (505) 675-5733 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 X October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 08/26/2024 09/25/2024

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

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Sworn to and subscribed before me, by the said, this the day			Signature of	Campaign Treas	urer	_
	AFFIX NOTAR	Y STAMP / SEAL ABOVE				
of, 20, to certify which, witness my hand and seal of office.	Sworn to and subscribe	ed 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 oath			5.1.1			_

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

3 of 5

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	7 COMMITTEE NAME Sombrero Advertising & Marketing 18 Filer ID 00087384				nics Commission Filers)
		_			
	NAME OF SCHEDULE				SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR 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 (ORGANIZATION	\$	
9.	Х	SCHEDULE E: LOANS		\$	0.00
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	0.00
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	\$	
				•	

		SCHEDULE	3
1		B:	
3		Commission Filers)	
	\$	(0.00
8	Amount of pledge (\$)	9 In-kind description (If applicable)	
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 ctio		or rexas. Complete Sched	uule 1.
00			
	8	Sch: 1/1 Rpt: 4/5 3 Filer ID (Ethics Composition of pledge (\$)	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5 3 Filer ID (Ethics Commission Filers) 00087384 \$ 8 Amount of pledge (\$) 9 In-kind description (If applicable)

	LOANS						SCHEDULE I	E
	The Instruction Guide explains how to complete this form					otal pages Scl ch: 1/1 Rpt:		
2	2 FILER NAME Sombrero Advertising & Marketing				l l	iler ID (Ethic	s Commission Filers	;)
4	TOTAL OF UN	IITEMIZED LOANS				\$	(0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Lo	an Amount (\$)	
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code			erest Rate	
						11 Ma	aturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Ins	structions)	•		
14	Description of Coll	ateral		15 Check if personal	funds were dep		l into political account (See Instructions)	
16	GUARANTOR INFORMATION	17 Name of guarantor				19 An	nount Guaranteed (\$	<i>.</i>)
	not applicable	18 Guarantor address; City;	State;	Zip Code				
20	Principal occupation	on		21 Employer (See Ins	structions)			