

**MONTHLY FILING GENERAL-PURPOSE
COMMITTEE CAMPAIGN FINANCE REPORT**

**FORM MPAC
COVER SHEET PG 1**

<p>The MPAC Instruction Guide explains how to complete this form.</p>		<p>1 Filer ID (Ethics Commission Filers) 00016047</p>	<p>2 Total pages filed: 6</p>				
<p>3 COMMITTEE NAME Houston Contractors Assn. PAC</p>		<p>OFFICE USE ONLY</p> <p>Date Received ELECTRONICALLY FILED 10/02/2024</p> <hr/> <p>Date Hand-delivered or Date Postmarked</p> <hr/> <table border="0"> <tr> <td>Receipt #</td> <td>Amount</td> </tr> <tr> <td> </td> <td> </td> </tr> </table> <hr/> <p>Date Processed</p> <hr/> <p>Date Imaged</p>		Receipt #	Amount		
Receipt #	Amount						
<p>4 COMMITTEE ADDRESS</p> <p><input type="checkbox"/> Change of Address</p>	<p>ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP P.O. Box 920843 Houston, TX 77292-0843</p>						
<p>5 CAMPAIGN TREASURER NAME</p>	<p>MS / MRS / MR FIRST MI Ms. Casey E.</p> <hr/> <p>NICKNAME LAST SUFFIX Christman</p>	<p>Date Processed</p> <hr/> <p>Date Imaged</p>					
<p>6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)</p>	<p>STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4001 Sherwood Lane Houston, TX 77092</p>						
<p>7 CAMPAIGN TREASURER MAILING ADDRESS</p> <p><input type="checkbox"/> Change of Address</p>	<p>STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4001 Sherwood Lane Houston, TX 77092</p>						
<p>8 CAMPAIGN TREASURER PHONE</p>	<p>AREA CODE PHONE NUMBER EXTENSION (713) 349-9434</p>						
<p>9 REPORT TYPE</p>	<p><input checked="checked" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)</p>						
<p>10 MONTHLY REPORT FILING DEADLINE</p>	<p><input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input checked="checked" type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5</p>						
<p>11 PERIOD COVERED</p>	<p>Month Day Year THROUGH Month Day Year 08/26/2024 THROUGH 09/25/2024</p>						

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Houston Contractors Assn. PAC	13 Filer ID (Ethics Commission Filers) 00016047
---	---

14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 1,300.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 4,300.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 261,601.09
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ms. Casey E. Christman

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 oath

SUBTOTALS - MPAC

17 COMMITTEE NAME Houston Contractors Assn. PAC		18 Filer ID (Ethics Commission Filers) 00016047
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,300.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 465.00
15.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 263.22

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/6
2 FILER NAME Houston Contractors Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016047
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aranda , Steven	7 Amount of Contribution (\$) \$1,200.00
	6 Contributor address; City; State; Zip Code Houston, TX 77080	
8 Principal occupation / Job title (See Instructions) Contractor		9 Employer (See Instructions) Reytec Construction Resources
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Matthew (Mr.)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Jersey Village, TX 77040	
Principal occupation / Job title (See Instructions) A1 Construction Services		Employer (See Instructions) Contractor
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ryan (Mr.)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Richmond, TX 77406	
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Five-S Group
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rhorick, Scott (Mr.)	Amount of Contribution (\$) \$1,200.00
	Contributor address; City; State; Zip Code Harker Heights, TX 76543	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) McWane Cast Iron Pipe Company
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stiver , John	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Houston, TX 77006	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Stiver Engineering

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt: 5/6	2 FILER NAME Houston Contractors Assn. PAC	3 Filer ID (Ethics Commission Filers) 00016047
4 Date 08/26/2024	5 Payee name Tom Ramsey Campaign	
6 Amount (\$) 465.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip PO Box 55385 Houston Houston, TX 77255	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Food & Beverages for Event

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 6/6
2 FILER NAME Houston Contractors Assn. PAC		3 Filer ID (Ethics Commission Filers) 00016047
4 Date 09/20/2024	5 Name of person from whom amount is received LPL Investments	8 Amount (\$) \$204.56
	6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77098	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	
Date 09/20/2024	Name of person from whom amount is received Trustmark Bank	Amount (\$) \$58.66
	Address of person from whom amount is received; City; State; Zip Code Houston, TX 77069	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	