

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

**FORM MPAC
COVER SHEET PG 1**

| | | | | | |
|--|---|---|---|----------------------------------|--|
| The MPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00069936 | | 2 Total pages filed: 9 | |
| 3 COMMITTEE NAME Texas Travel Alliance PAC | | | OFFICE USE ONLY | | |
| | | | Date Received ELECTRONICALLY FILED 10/02/2024 | | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 400 W. 15th Street 950 AUSTIN, TX 78701 | | | | Date Hand-delivered or Date Postmarked |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR Mr. | | FIRST Jay B. | | MI |
| | NICKNAME | | LAST Stewart | | SUFFIX |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | | | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 400 W. 15th Street, Suite 950 Austin, TX 78701 | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | | | STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 400 W. 15th Street, Suite 950 Austin, TX 78701 | | |
| 8 CAMPAIGN TREASURER PHONE | | | AREA CODE PHONE NUMBER EXTENSION (512) 479-8888 | | |
| 9 REPORT TYPE | | | | | |
| <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR) | | | | | |
| 10 MONTHLY REPORT FILING DEADLINE | | | | | |
| <input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input 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 | | | | | |
| 11 PERIOD COVERED | | | | | |
| Month Day Year THROUGH Month Day Year 08/26/2024 09/25/2024 | | | | | |

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

| | |
|---|---|
| 12 COMMITTEE NAME Texas Travel Alliance PAC | 13 Filer ID (Ethics Commission Filers) 00069936 |
|---|---|

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|---|--|---|--|
| 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.) | Barbara Gervin-Hawkins State Representative | |

| | | |
|-------------------------------|---|--------------|
| 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 | \$ 0.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ 840.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 3,055.57 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 22,488.27 |
| 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.

Mr. Jay B. Stewart

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 Texas Travel Alliance PAC | | 18 Filer ID (Ethics Commission Filers) 00069936 |
| 19 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
| | NAME OF SCHEDULE | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 840.00 |
| 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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 3,055.57 |
| 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 type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 15. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/9 |
| 2 FILER NAME Texas Travel Alliance PAC | | 3 Filer ID (Ethics Commission Filers) 00069936 |
| 4 Date 09/01/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Evan <hr/> 6 Contributor address; City; State; Zip Code Fulshear, TX 77441 | 7 Amount of Contribution (\$) \$20.00 |
| 8 Principal occupation / Job title (See Instructions) President | | 9 Employer (See Instructions) Pyek Group |
| Date 08/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bayes, Diann <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76901 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Vice President | | Employer (See Instructions) Visit Tyler |
| Date 08/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blevins, Johnny <hr/> Contributor address; City; State; Zip Code Canton, TX 75103 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) President/CEO | | Employer (See Instructions) Splash Kingdom Waterparks |
| Date 08/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd, Erika <hr/> Contributor address; City; State; Zip Code Austin, TX 78739 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) President & CEO | | Employer (See Instructions) Texas Travel Alliance |
| Date 08/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bybee-Dziedzic, Jessica <hr/> Contributor address; City; State; Zip Code Austin, TX 78745 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Vice President of Client Operations | | Employer (See Instructions) Saffire |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/9 |
| 2 FILER NAME Texas Travel Alliance PAC | | 3 Filer ID (Ethics Commission Filers) 00069936 |
| 4 Date 08/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Katherine <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78681 | 7 Amount of Contribution (\$) \$20.00 |
| 8 Principal occupation / Job title (See Instructions) VP Strategic Services | | 9 Employer (See Instructions) Zartico |
| Date 08/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danesi, Kimberly <hr/> Contributor address; City; State; Zip Code Galveston, TX 77554 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) CEO | | Employer (See Instructions) Visit Galveston |
| Date 08/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Amanda <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78210 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Chief Public Affairs Officer | | Employer (See Instructions) Texas Travel Alliance |
| Date 08/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jameson, Robert <hr/> Contributor address; City; State; Zip Code Fort worth, TX 76102 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) President & CEO | | Employer (See Instructions) Visit Fort Worth |
| Date 08/26/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenzie, Ronald <hr/> Contributor address; City; State; Zip Code Cedar Hill, TX 75104 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) Director of Marketin | | Employer (See Instructions) ProPark Attractions Group |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/9 |
| 2 FILER NAME Texas Travel Alliance PAC | | 3 Filer ID (Ethics Commission Filers) 00069936 |
| 4 Date 09/24/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mery Kearns, Roxanne <hr/> 6 Contributor address; City; State; Zip Code Boerne, TX 78006 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) General Sales Manager | | 9 Employer (See Instructions) Fiesta Texas |
| Date 08/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Patricia <hr/> Contributor address; City; State; Zip Code Bandera, TX 78003 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) Bandera County CVB |
| Date 09/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Patricia <hr/> Contributor address; City; State; Zip Code Bandera, TX 78003 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) Bandera County CVB |
| Date 08/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrow, Tim <hr/> Contributor address; City; State; Zip Code Boerne, TX 78006 | Amount of Contribution (\$) \$40.00 |
| Principal occupation / Job title (See Instructions) President/CEO | | Employer (See Instructions) San Antonio Zoo |
| Date 08/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborne Jr., John <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) President/CEO | | Employer (See Instructions) Visit Lubbock |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/9 |
| 2 FILER NAME Texas Travel Alliance PAC | | 3 Filer ID (Ethics Commission Filers) 00069936 |
| 4 Date 08/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Sarah <hr/> 6 Contributor address; City; State; Zip Code Round Rock, TX 78665 | 7 Amount of Contribution (\$) \$20.00 |
| 8 Principal occupation / Job title (See Instructions) Heritage Tourism Program Coordinator | | 9 Employer (See Instructions) Texas Historical Commission |
| Date 08/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos, Aileen <hr/> Contributor address; City; State; Zip Code Laredo, TX 78041 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Laredo CVB Director | | Employer (See Instructions) Laredo Convention &Visitors Bureau |
| Date 08/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rotella, Rachel <hr/> Contributor address; City; State; Zip Code Grand Prarie, TX 75052 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) General Manager | | Employer (See Instructions) Ripley Entertainment |
| Date 08/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Paul <hr/> Contributor address; City; State; Zip Code Houston, TX 77001 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) V.P. Hospitality, Landry's Hotel Div | | Employer (See Instructions) Landrys, Inc. |
| Date 09/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Kashion <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79102 | Amount of Contribution (\$) \$85.00 |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) Amarillo CVB |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/9 |
| 2 FILER NAME Texas Travel Alliance PAC | | 3 Filer ID (Ethics Commission Filers) 00069936 |
| 4 Date 08/30/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wuest, Brad | 7 Amount of Contribution (\$) \$100.00 |
| | 6 Contributor address; City; State; Zip Code Natural Bridge Caverns, TX 78266 | |
| 8 Principal occupation / Job title (See Instructions) President | | 9 Employer (See Instructions) Natural Bridge Caverns |

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
Credit Card Payment

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

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule F1: Sch: 1/1 Rpt: 9/9 | 2 FILER NAME Texas Travel Alliance PAC | 3 Filer ID (Ethics Commission Filers) 00069936 |
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| | |
|-----------------------------|--|
| 4 Date 09/25/2024 | 5 Payee name Barbara Gervin-Hawkins Campaign |
|-----------------------------|--|

| | |
|---|---|
| 6 Amount (\$) \$3,000.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 3503 N.E. Parkway San Antonio, TX 78218 |
|---|---|

| | | |
|---------------------------------|---|---|
| 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution |
|---------------------------------|---|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|-----------------------------------|
| Date 08/31/2024 | Payee name CardConnect/BluePay |
|--------------------|-----------------------------------|

| | |
|---|--|
| Amount (\$) \$55.57 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code Blue Pay Processing 184 Shuman Boulevard, Suite 350 Naperville, IL 60563 |
|---|--|

| | | |
|-------------------------------|---|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card Fees |
|-------------------------------|---|--|

| | | | |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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