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) 00084895 3 COMMITTEE NAME **OFFICE USE ONLY** Fort Bend Business Coalition PAC Date Received **ELECTRONICALLY FILED** 10/07/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 19336 Date Hand-delivered or Date Postmarked Change of Address Sugar Land, TX 77496 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Jared NAME NICKNAME LAST **SUFFIX** Jameson STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** P.O. Box 19336 STREET **ADDRESS** (Residence or Business) Sugar Land, TX 77496 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2333 Town Center Dr. Ste. 100 MAILING **ADDRESS** Sugar Land, TX 77478 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 634-9400 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 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2024 09/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

COMMITTEE NAME		13 Filer ID	(Ethics Commission Filers)	
Fort Bend Business Coalition PAC		00084895	j	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(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		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	IL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	6,759.93
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	76,079.29
OUTSTANDING LOAN TOTALS	I .	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			I	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Jared 3	Jameson	
		Signature of Car	mpaign Treası	urer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, tł	nis the	day
of	, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offi	cer administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

				3 of 8
	17 COMMITTEE NAME Fort Bend Business Coalition PAC 18 Filer ID 00084895			(Ethics Commission Filers)
		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,000.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	TION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 6,759.93
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$
ĺ				

MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
The Instruction Guide explains how to complete this form. 2 FILER NAME Fort Bend Business Coalition PAC					
					n Filers)
Date 09/03/2024	5 Full name of contributor out-of-state PAC (ID# Thompson, Jimmy 6 Contributor address; City; State; Zip Code	#:)	7	Amount of Contribution (\$)	\$1,000.00
	Sugar Land, TX 77498	1			
Principal occu N/A	upation / Job title (See Instructions)	9 Employer (See Instruction:	ıs)		
	FILER NAME Fort Bend B Date 09/03/2024	The Instruction Guide explains how to complete this FILER NAME Fort Bend Business Coalition PAC Date 09/03/2024 5 Full name of contributor out-of-state PAC (ID Thompson, Jimmy 6 Contributor address; City; State; Zip Code Sugar Land, TX 77498 Principal occupation / Job title (See Instructions)	FILER NAME Fort Bend Business Coalition PAC Date 09/03/2024 Thompson, Jimmy 6 Contributor address; City; State; Zip Code Sugar Land, TX 77498 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	The Instruction Guide explains how to complete this form. FILER NAME Fort Bend Business Coalition PAC Date 09/03/2024 Thompson, Jimmy 6 Contributor address; City; State; Zip Code Sugar Land, TX 77498 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	The Instruction Guide explains how to complete this form. FILER NAME Fort Bend Business Coalition PAC Date 09/03/2024 G Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) 1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/8 3 Filer ID (Ethics Commission 00084895) 7 Amount of Contribution (\$)

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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)

Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/4 Rpt: 5/8	Fort Bend Business Coalition PAC	00084895
4 Date	5 Payee name	
07/30/2024	Absolutely Focus Media	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,500.00	P.O. Box 1253	
Expenditure from		
corporate funds	Richmond, TX 77406	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Administrative support/marketing
		Administrative supportmarketing
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI		Office field
Date	B	
08/09/2024	Payee name Absolutely Focus Media	
	•	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,500.00	P.O. Box 1253	
Expenditure from corporate funds	Richmond, TX 77406	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Administrative support/marketing
		Autimistrative supportmarketing
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	•	Since note
Date	Payee name	
09/16/2024	Absolutely Focus Media	
	-	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code P.O. Box 1253	
Ψ2,000.00	F.O. BOX 1293	
Expenditure from corporate funds	Richmond, TX 77406	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	σοιοιιαίος — φοιοσ	Check if Austin, TX, officeholder living expense
		Administrative support/marketing
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
experialitie to benefit C/Oi	1	

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Credit Card Payment	The Instruction Guide explains how to	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/4 Rpt: 6/8	Fort Bend Business Coalition PAC	00084895
4 Date	5 Payee name	<u> </u>
09/16/2024	Gracias Grazing	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$900.00	1106 Trenton St	
Expenditure from corporate funds	Richmond, TX 77469	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Catering/Food for event
		Catching/1 cod for event
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Dught Office held
expenditure to benefit C/OI		ought Office field
Date	Payee name	
07/08/2024	Intuit Inc	
Amount (\$)	Payee address; City; State; Zip (Code
\$63.96	2632 Marine Way	
- Funanditura from		
Expenditure from corporate funds	Mountain View , CA 94043	
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
		Accounting software - monthly fee
		7 loosanting contract monthly too
Complete ONLY if direct	Candidate/Officeholder name Office so	L pught Office held
expenditure to benefit C/OI		ought Office field
D-1-		
Date	Payee name	
08/08/2024	Intuit Inc	
Amount (\$)	Payee address; City; State; Zip C	Code
\$69.29	2632 Marine Way	
Expenditure from		
corporate funds	Mountain View , CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Accounting software - monthly fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ought Office held
SAPORARIO TO BOTTON O/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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	<u> </u>
Sch: 3/4 Rpt: 7/8	Fort Bend Business Coalition PAC 00084895
4 Date	5 Payee name
09/09/2024	Intuit Inc
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$69.29	2632 Marine Way
Expenditure from corporate funds	Mountain View , CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Accounting software - monthly fee
	7 toodanting sollware monthly rec
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
09/16/2024	Johnston, Dave
Amount (\$)	Payee address; City; State; Zip Code
\$60.39	15334 Oyster Creek Ln.
Expenditure from corporate funds	Sugar Land, TX 77478
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Lunch cost for meeting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H
Date	Payee name
07/02/2024	Safari Texas Ranch
Amount (\$)	Payee address; City; State; Zip Code
\$354.00	11627 FM 1464
Ψ004.00	11027 F W 1404
Expenditure from corporate funds	Richmond, TX 77407
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Catering and beverage cost
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H

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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/4 Rpt: 8/8	Fort Bend Business Coalition PAC 00084895
4 Date	5 Payee name
08/23/2024	Star Treatment Valet
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$180.00	4102 Waterstone
Expenditure from corporate funds	Missouri City, TX 77459
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Valet parking company
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/09/2024	WJ Interests, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$63.00	2333 Town Center Drive
, , , , ,	Suite 100
Expenditure from	
corporate funds	Sugar Land, TX 77478
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Reimbursement for PO Box
	Trembulgering it of Box
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	