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) 00084763 3 COMMITTEE NAME **OFFICE USE ONLY DEC PAC** Date Received **ELECTRONICALLY FILED** 10/08/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 1 E Greenway Plaza Ste 225 Change of Address Houston, TX 77046 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Chris NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Sallese CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1 E Greenway Plaza Ste 225 STREET **ADDRESS** (Residence or Business) Houston, TX 77046 **CAMPAIGN** STREET ADDRESS OR PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1 E. Greenway Plaza Ste. 225 MAILING **ADDRESS** Change of Address Houston, TX 77046 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 526-3399 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

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
DEC PAC			00084763	1
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Stacy Adams Brazoria County	Commission	ner
(Attach lists on plain paper to complete this report if necessary.)		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	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	11,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	48,262.12
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of petrue and correct and includes all inforrunder Title 15, Election Code.		
		Chris :	Sallese	
		Signature of Car	mpaign Treası	urer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, th	nis the	day
of	, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer adr	ministering oath	Printed name of officer administering oath	Title of offi	cer administering oath

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC ADDENDUM

Candidates ntify by name or, if licable, classify by party.) Measures scribe by date and tion of election and ire of issue.) Officeholders Assisted ntify by name or, if		Andy Myers Fort Bend County	13 Filer ID 00084763 Commissioner	(Ethics Commission Filers)
ntify by name or, if licable, classify by party.) Measures scribe by date and tion of election and ure of issue.) Officeholders Assisted	B. Opposed A. Supported	Andy Myers Fort Bend County		
ntify by name or, if licable, classify by party.) Measures scribe by date and tion of election and ure of issue.) Officeholders Assisted	B. Opposed A. Supported	Andy Myers Fort Bend County	Commissioner	
oscribe by date and tition of election and ure of issue.) Officeholders Assisted				
oscribe by date and tition of election and ure of issue.) Officeholders Assisted				
Assisted	B. Opposed			
Assisted				
licable, classify by party.)				
Candidates ntify by name or, if licable, classify by party.)		Jose Menendez State Senator		
	B. Opposed			
Measures scribe by date and tion of election and ure of issue.)	A. Supported			
	B. Opposed			
Officeholders Assisted ntify by name or, if licable, classify by party.)				
Candidates ntify by name or, if licable, classify by party.)		David Linder Brazoria County C	Commissioner	
	B. Opposed			
Measures scribe by date and tion of election and ire of issue.)	A. Supported			
	B. Opposed			
Officeholders Assisted ntify by name or, if licable, classify by party.)				
no lice	Measures Caribe by date and on of election and e of issue.) Measures Caribe by date and on of election and e of issue.) Candidates Lify by name or, if cable, classify by party.) Candidates Lify by name or, if cable, classify by party.) Measures Caribe by date and on of election and e of issue.)	Measures cribe by date and on of election and e of issue.) Difficeholders Assisted Lify by name or, if cable, classify by party.) Candidates Lify by name or, if cable, classify by party.) Candidates Lify by name or, if cable, classify by party.) B. Opposed Measures Lify by name or, if cable, classify by party.) B. Opposed Measures Lify by name or, if cable, classify by party.) B. Opposed Difficeholders Lify by name or, if cable, classify by party.) B. Opposed Difficeholders Lify by name or, if cable, classify by party.) B. Opposed Difficeholders Lify by name or, if cable, classify by party.) B. Opposed	Example to the content of the conten	Measures cribe by date and on of election and e of issue.) B. Opposed A. Supported B. Opposed A. Supported B. Opposed Difficeholders Assisted tify by name or, if table, classify by party.) B. Opposed A. Supported David Linder Brazoria County Commissioner dable, classify by party. B. Opposed A. Supported David Linder Brazoria County Commissioner dable, classify by party. B. Opposed Measures cribe by date and on of election and e of issue.) B. Opposed B. Opposed Difficeholders Assisted tify by name or, if dable, classify by date and on of election and e of issue.)

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC

						ADDENDUM
						Page 4 of 7
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
DEC PAC					00084763	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Joe Guisti Ga	alveston County C	ommissioner	
(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	d			
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	d Eddit Trevino	Cameron County	Judge	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	d			
		B. Opposed				
	Officeholders Assisted					
	(Identify by name or, if applicable, classify by party.)					

FORM MPAC **SUBTOTALS - MPAC COVER SHEET PG 3** 17 COMMITTEE NAME 18 Filer ID (Ethics Commission Filers) **DEC PAC** 00084763 19 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B: PLEDGED CONTRIBUTIONS 3. \$ SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR \$ **ORGANIZATION** SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR 5. \$ LABOR ORGANIZATION SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION 6. \$ SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR 7. \$ **ORGANIZATION** SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION 8. \$ SCHEDULE E: LOANS \$ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 10. X \$ 11,500.00 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 11. \$ 12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 13. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 14. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 15. \$ TO FILER

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - 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
OTHER (expense a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula F1:	2 Files ID (Ethics Commission Files)
1 Total pages Schedule F1: Sch: 1/2 Rpt: 6/7	2 FILER NAME DEC PAC 3 Filer ID (Ethics Commission Filers) 00084763
4 Date	F 0
	5 Payee name
08/27/2024	Andy Myers Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	423 Longview Drive
, ,	
Expenditure from	
corporate funds	Sugar Land, TX 77478
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Political Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
09/16/2024	David Linder Campaign
	. •
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 471
Expenditure from corporate funds	West Columbia, TX 77486
•	West Columbia, 17/17400
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
09/17/2024	Eddie Trevino Jr Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	2200 Boca Chita Blvd Ste 102
Ψ5,000.00	2200 Book Critic Biva Ste 102
Expenditure from	
corporate funds	Brownsville, TX 78521
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Political Contribution
Operation Children	On didn't 10 ff a halden name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to beliefft G/O	·

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1 Total pages Cabadula F4:					
1 Total pages Schedule F1:					
Sch: 2/2 Rpt: 7/7	DEC PAC 00084763				
4 Date	5 Payee name				
09/16/2024	Joe Giusti Campaign				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$1,500.00	12508 D Bar Dr				
, ,					
Expenditure from	Conto Fo. TV 77F10				
corporate funds	Santa Fe, TX 77510				
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.				
	Candidate/Officeholder/Political Committee				
	Total Contribution				
O Complete ONLY if allow	Condidate/Officeholder name Office accepts				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
,					
Date	Payee name				
09/04/2024	Jose Menendez Campaign				
Amount (\$)	Payee address; City; State; Zip Code				
\$500.00	PO Box 100833				
Expenditure from	San Antonio, TX 78201				
corporate funds					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	Political Contribution				
	T Gildoai Gorialisation				
Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
08/27/2024	Stacy Adams Campaign				
Amount (\$)	Payee address; City; State; Zip Code				
\$1,000.00	PO Box 548				
Expenditure from corporate funds	Alvin, TX 77512				
•					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	Political Contribution				
	Totalog Contribution				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI					
,					