

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00066771	2 Total pages filed: 10
3 COMMITTEE NAME Republican State Leadership Committee PAC and Individual Account		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 10/28/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1201 F St. N.W., Ste. 675 Washington, DC 20004	Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Cabell		
	NICKNAME LAST SUFFIX Hobbs		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1201 F St. N.W., Ste. 675 Washington, DC 20004		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1201 F St. N.W., Ste. 675 Washington, DC 20004		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (202) 448-5160		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 07/01/2024 10/26/2024		
11 ELECTION	ELECTION DATE Month Day Year 11/05/2024	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Republican State Leadership Committee PAC and Individual Account	13 Filer ID (Ethics Commission Filers) 00066771
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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 Janie Lopez State Representative
		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	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,285,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,997,150.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 201,399.50
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. Cabell Hobbs

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

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12 COMMITTEE NAME Republican State Leadership Committee PAC and Individual Account	13 Filer ID (Ethics Commission Filers) 00066771
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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 Angie Chen Button State Representative
		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.)	

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 John Lujan State Representative
		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.)	

SUBTOTALS - GPAC

17 COMMITTEE NAME Republican State Leadership Committee PAC and Individual Account		18 Filer ID (Ethics Commission Filers) 00066771
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,285,000.00
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	\$ 4,997,150.00
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: 1/4 Rpt: 5/10
2 FILER NAME Republican State Leadership Committee PAC and Individual Account		3 Filer ID (Ethics Commission Filers) 00066771
4 Date 07/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campos, Alex <hr/> 6 Contributor address; City; State; Zip Code Buford, GA 30519	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Systems Administration		9 Employer (See Instructions) Vensure Employer
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleveland, Jr., Jay <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15238	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) President and CEO		Employer (See Instructions) Cleveland Brothers Equipment Company
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cogdell, James <hr/> Contributor address; City; State; Zip Code Charlotte, DC 28210	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Cogdell Spencer Advisors
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coulombe, Paul <hr/> Contributor address; City; State; Zip Code Southport, ME 04576	Amount of Contribution (\$) \$50,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVos, Daniel <hr/> Contributor address; City; State; Zip Code Grand Rapids, MI 49503	Amount of Contribution (\$) \$100,000.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) RDV Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 6/10
2 FILER NAME Republican State Leadership Committee PAC and Individual Account		3 Filer ID (Ethics Commission Filers) 00066771
4 Date 10/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVos, Douglas	7 Amount of Contribution (\$) \$100,000.00
6 Contributor address; City; State; Zip Code Grand Rapids, MI 49503		
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Amway
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVos, Suzanne	Amount of Contribution (\$) \$100,000.00
Contributor address; City; State; Zip Code Grand Rapids, MI 49503		
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) RDV Corporation
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeVos Jr., Richard	Amount of Contribution (\$) \$100,000.00
Contributor address; City; State; Zip Code Grand Rapids, MI 49503		
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) RDV Corporation
Date 07/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Valle, Gilberto	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Guaynabo Guaynabo 00657 Puerto Rico		
Principal occupation / Job title (See Instructions) Corporate Treasurer		Employer (See Instructions) EMPRESAS FONALLEDAS
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fehr, Bradley	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code Morris, MN 56267		
Principal occupation / Job title (See Instructions) Agronomy		Employer (See Instructions) Riverview, LP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 7/10
2 FILER NAME Republican State Leadership Committee PAC and Individual Account		3 Filer ID (Ethics Commission Filers) 00066771
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilliam, Jim <hr/> 6 Contributor address; City; State; Zip Code Franklin, TN 37069	7 Amount of Contribution (\$) \$1,250.00
8 Principal occupation / Job title (See Instructions) Senior Vice President		9 Employer (See Instructions) HFR Design
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Stephen P. <hr/> Contributor address; City; State; Zip Code Brentwood, TN 37027	Amount of Contribution (\$) \$1,250.00
Principal occupation / Job title (See Instructions) Principal in Charge		Employer (See Instructions) HFR Design
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herring, William <hr/> Contributor address; City; State; Zip Code Newton Grove, NC 28366	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hildebrand, Jeff <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$100,000.00
Principal occupation / Job title (See Instructions) Founder & Executive Chairman		Employer (See Instructions) Hilcorp Energy Company
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Meijer <hr/> Contributor address; City; State; Zip Code Grand Rapids, MI 49515	Amount of Contribution (\$) \$100,000.00
Principal occupation / Job title (See Instructions) PRESIDENT		Employer (See Instructions) MEIJER COMPANY

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 8/10
2 FILER NAME Republican State Leadership Committee PAC and Individual Account		3 Filer ID (Ethics Commission Filers) 00066771
4 Date 07/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCutcheon, Shawn <hr/> 6 Contributor address; City; State; Zip Code Birmingham, AL 35226	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Coalmont Electrical Development Corporation
Date 09/25/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: _____) RSLC - Great Lakes PAC <hr/> Contributor address; City; State; Zip Code Washington, DC 20004	Amount of Contribution (\$) \$60,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00808311) RSLC Victory Fund <hr/> Contributor address; City; State; Zip Code Washington, DC 20004	Amount of Contribution (\$) \$500,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shah, Anik <hr/> Contributor address; City; State; Zip Code Chicago, IL 60622	Amount of Contribution (\$) \$25,000.00
Principal occupation / Job title (See Instructions) INVESTOR		Employer (See Instructions) SUSQUEHANNA GROWTH EQUITY

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: 1/2 Rpt: 9/10	2 FILER NAME Republican State Leadership Committee PAC and Individual	3 Filer ID (Ethics Commission Filers) 00066771
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4 Date 10/15/2024	5 Payee name Angie Chen Button Campaign
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6 Amount (\$) \$75,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6914 Clear Springs Circle Garland, TX 75044
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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 Contribution
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/15/2024	Payee name Associated Republicans of Texas Campaign Fund
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Amount (\$) \$75,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 807 Brazos Suite 601 Austin, TX 78701
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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 Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/15/2024	Payee name John Lujan for State Representative
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Amount (\$) \$100,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 20003 FM1937 San Antonio, TX 78221
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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 Contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 2/2 Rpt: 10/10	2 FILER NAME Republican State Leadership Committee PAC and Individual	3 Filer ID (Ethics Commission Filers) 00066771
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4 Date 10/11/2024	5 Payee name Poolhouse Agency LLC
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6 Amount (\$) \$50,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 23 W. Broad Street Suite 200 Richmond, VA 23220
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Advertising; In-kind to Janie Lopez Campaign
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/26/2024	Payee name Republican State Leadership Committee PAC and Individual
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Amount (\$) \$4,697,150.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1201 F St NW Ste. 675 Washington, DC 20004
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Expenditures Not Related to Texas	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Expenditures Not Related to Texas
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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