# CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

#### FORM COR-PAC

1	`	ics Commission Filers)	2 Total pages filed:			OFFICE U	SE ONLY
	00028200		6			Date Received	
3	COMMITTEE NAME	Associated Builders &	Contractors, Inc., Te	exas Coastal Bend	PAC	ELECTRONICA 12/05/2024	LLY FILED
4	TREASURER	Lewis, Lance Scott (Mi	( )			12/03/2024	
	NAME	Lewis, Larioe Cook (Wi	•)			Date Hand-delivered or	Date Postmarked
5	ORIGINAL	January 15	Run	off		Date Halla delivered of	Date 1 osumarkeu
	REPORT TYPE	July 15	10th	day after campaign tre	asurer resignation	Receipt #	Amount
		30th day before election	<b>=</b>	olution report		Date Processed	
		8th day before election	X Othe	er (specify) February	<i>'</i> 5	Date Flocesseu	
6	ORIGINAL PERIOD COVERED	Month Day Ye 12/26/2023	ar THROUGH	Month Day 01/25/2024	Year L	Date Imaged	
7	EXPLANATION OF C			01,20,202	•		
tak	cen in and no political c	hand. This was unintention contributions were made in a Texas Ethics Commission	this reporting/clerical				
8	AFFIDAVIT		1				
				ear, or affirm, under correct.	penalty of perjury	, that this corrected	report is true
			Che	eck the box next to a	ny and all applical	ble statements:	
	Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.						
			X	report not later that that the report as o	n the 14th busine: originally filed is in nat any error or on	that I am filing this one stay after the date accurate or incomplete in the report	e I learned lete. I
					Mr. Lance Sco	ott Lewis	
				Sig	gnature of Campai	ign Treasurer	
	AFFIX NOTARY ST	AMP / SEAL ABOVE					
	Sworn to and subsc	ribed before me, by the sa	id		, this th	ne	day
	of	, 20, to ce	rtify which, witness my	hand and seal of offi	ice.		
_	Signature of office	er administering oath	Printed name of o	fficer administering o	oath 7	Title of officer admin	istering oath
		Remember To At	tach Any Part Of	The Campaign	Finance Rep	ort Form	

Remember To Attach Any Part Of The Campaign Finance Report Forn Needed To Report And Explain Corrections

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

## FORM MPAC COVER SHEET PG 1

Th	e MPAC Instruction (	Guide explains how to complete this form.	Filer ID (Ethics Commission Filers) 00028200	Total pages filed:     6
		ŭ		
3	COMMITTEE NAME		OFFICE USE ONLY	
	Associated Builders	& Contractors, Inc., Texas Coastal Bend P	PAC	Date Received
				ELECTRONICALLY FILED
l				12/05/2024
Ŀ	0014147777	ADDDESS / DO DOY	VTV 07475 715	12/03/2024
4	COMMITTEE ADDRESS	· · · · · ·	ITY; STATE; ZIP	
l	, IDBN 200	7433 Leopard St.		
l				
l	Change of Address	Corpus Christi, TX 78409		Date Hand-delivered or Date Postmarked
5	CAMPAIGN	MS / MRS / MR FIRST	MI	
l	TREASURER	Mr. Lance Scot	ıt.	Receipt # Amount
l	NAME			
l				Date Processed
l		NICKNAME LAST	SUFFIX	
l		Lewis		Date Imaged
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY; STA	ATE; ZIP CODE
l	TREASURER	2033 FM 2725		
	STREET ADDRESS	2000 T III 21 20		
	(Residence or Business)			
		Ingleside, TX 78362		
7	CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; ST	ATE; ZIP CODE
l	TREASURER MAILING	2033 FM 2725		
	ADDRESS			
	Change of Address	Ingleside, TX 78362		
L				
8	CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	EXTENSION	
l	PHONE	(361) 523-9992		
L				
9	REPORT TYPE	X Monthly	10th day after campaign	Dissolution (Attach PAC-DR)
		[X] Montany	L treasurer termination	
10	MONTHLY			
	REPORT FILING DEADLINE	January 5 April 5	July 5	October 5
	DEADEINE	X February 5 May 5	August 5	November 5
			<u>—</u>	
		March 5 June 5	September 5	December 5
11	PERIOD	Month Day Year	Month	Day Year
	COVERED	12/26/2023 TH	ROUGH 01/25/2	
_		12/20/2020	01/20/2	
l				
		GO TO	PAGE 2	
1				

#### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

### FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	& Contractors, Inc., Texas	Coastal Bend PAC		00028200	
L4 COMMITTEE ACTIVITY	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			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
.5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTION GUARANTEES OF LO. ADE ELECTRONICALLY) qualifies for the higher itemizat	ANS, ÒR	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARA	ANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS			\$	0.00	
	4. TOTAL POLITICA	L EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		DAY \$	3,643.99	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		THE \$	0.00	
.6 AFFIDAVIT	l			ı	
		true and corr	firm, under penalty of pe ect and includes all infor 5, Election Code.		
			Mr. Lance	Scott Lewis	
			Signature of Ca	mpaign Treasu	ırer
AFFIX NOTAR	RY STAMP / SEAL ABOVE				
Sworn to and subscrib	ed before me, by the said		, t	his the	day
	, 20, to certify v				
Signature of officer	administering oath	Printed name of officer adn	ninistering oath	Title of office	cer administering oath

#### **SUBTOTALS - MPAC**

### FORM MPAC COVER SHEET PG 3

			4 of 6
17 COMMITTE Associate	EE NAME d Builders & Contractors, Inc., Texas Coastal Bend PAC	<b>18</b> Filer ID 00028200	(Ethics Commission Filers)
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 0.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	)R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	<b>\$</b> 255.69
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$

### NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE I

	The Instruction Guide explains how to complete this form.
1 Total pages Schedule I:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 5/6	Associated Builders & Contractors, Inc., Texas Coastal 00028200
4 Date	5 Payee name
01/10/2024	Clover
6 Amount (\$)	7 Payee Address; City; State; Zip
42.44	415 N Mathilda Ave
Expenditure from corporate funds	Sunnyvale , CA 94085
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Accounting/Banking Clover App Fee
Date	Payee name
12/31/2023	Frost Bank
Amount (\$)	Payee Address; City; State; Zip
3.00	2402 Leopard St
Expenditure from	
corporate funds	Corpus Christi, TX 78408
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)  Accounting/Banking Service Charge Fee
EXPENDITURE	Accounting/Banking Service Charge Fee
Date	Payee name
01/02/2024	Frost Bank
Amount (\$)	Payee Address; City; State; Zip
90.94	2402 Leopard St
Expenditure from	Compute Christi TV 70400
corporate funds	Corpus Christi, TX 78408
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)  Accounting/Banking  (b) Description (See instructions regarding type of information required.)  Bankcard Deposit Monthly Fees
EXPENDITURE	Bankcard Deposit Monthly Fees
Date	Payee name
01/02/2024	Frost Bank
Amount (\$)	Payee Address; City; State; Zip
98.71	2402 Leopard St
Expenditure from	
corporate funds	Corpus Christi, TX 78408
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
EXPENDITURE	Accounting/Banking FDMS Settlement
	I L

	The Instruction Guide explains how to complete this form.					
Total pages Schedule I: Sch: 2/2 Rpt: 6/6	2 FILER NAME Associated Builders & Contractors, Inc., Texas Coastal	3 Filer ID (Ethics Commission Filers) 00028200				
Date 01/18/2024	5 Payee name Frost Bank					
Amount (\$)  20.60  Expenditure from	7 Payee Address; City; State; Zip 2402 Leopard St  Corpus Christi, TX 78408					
corporate funds PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Description	(See instructions regarding type of information required.)  Mgmt Services				