CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

	\sim	\mathbf{r}	\Box	
FORM	LU	K-	РΑ	L

1	•	cs Commission Filers)	2 Total pages filed:			OFFICE	USE ONLY
	00028200		9			Date Received	
3	COMMITTEE NAME	Associated Builders &	Contractors, Inc., To	exas Coastal Bend	I PAC	ELECTRONIC 10/14/2024	CALLY FILED
4	TREASURER NAME	Lewis, Lance Scott (M	r.)				ov Data Data and A
5	ORIGINAL REPORT TYPE	January 15 July 15 30th day before election	=	noff n day after campaign tre solution report	easurer resignation	Date Hand-delivered Receipt #	Amount
		8th day before election	X Oth	er (specify) October	5	Date Processed	
6	ORIGINAL PERIOD COVERED	Month Day Ye 08/26/2024	ear THROUGH	Month Day 09/25/2024	Year 4	Date Imaged	
7	EXPLANATION OF C	ORRECTION					
B	AFFIDAVIT			vear, or affirm, under d correct.	penalty of perjury	r, that this correct	ed report is true
8	AFFIDAVIT		and				ed report is true
8	AFFIDAVIT		and	d correct.	nny and all applica orts: I swear or a faith and without	ble statements: affirm, that the ori an intent to misle	ginal report
В	AFFIDAVIT		and	d correct. eck the box next to a Semiannual repo was made in good	orts: I swear or a faith and without information contain I swear, or affirm, an the 14th busine originally filed is in that any error or on	ble statements: affirm, that the ori an intent to misle ned in the report. that I am filing thi as day after the d accurate or incon	ginal report ad or to is corrected ate I learned nplete. I
8	AFFIDAVIT		and Ch	Semiannual repo was made in good misrepresent the i Other reports: report not later tha that the report as swear, or affirm, the filed was made in	orts: I swear or a faith and without information contain. I swear, or affirm, an the 14th busine originally filed is in that any error or or good faith. Mr. Lance Sco	ble statements: affirm, that the ori an intent to misle ned in the report. that I am filing thi ass day after the d naccurate or incon nission in the repo	ginal report ad or to is corrected ate I learned nplete. I
8	AFFIX NOTARY STA	AMP / SEAL ABOVE	and Ch	Semiannual repo was made in good misrepresent the i Other reports: report not later tha that the report as swear, or affirm, the filed was made in	orts: I swear or a faith and without information contain. I swear, or affirm, an the 14th busine originally filed is in nat any error or on good faith.	ble statements: affirm, that the ori an intent to misle ned in the report. that I am filing thi ass day after the d naccurate or incon nission in the repo	ginal report ad or to is corrected ate I learned nplete. I
В	AFFIX NOTARY STA	AMP / SEAL ABOVE	and Ch	Semiannual reports: report not later that the report as swear, or affirm, the filled was made in	orts: I swear or a faith and without information contain. I swear, or affirm, an the 14th busine originally filed is in that any error or on good faith. Mr. Lance Scongnature of Campa	affirm, that the ori an intent to misle ned in the report. that I am filing thi ss day after the d naccurate or incon nission in the repo	ginal report ad or to is corrected ate I learned nplete. I ort as originally
8	AFFIX NOTARY STA		and Ch	Semiannual reports: report not later that the report as swear, or affirm, the filled was made in	orts: I swear or a faith and without information contain I swear, or affirm, an the 14th busine originally filed is in that any error or on good faith. Mr. Lance Scongnature of Campa	affirm, that the ori an intent to misle ned in the report. that I am filing thi ss day after the d naccurate or incon nission in the repo	ginal report ad or to is corrected ate I learned nplete. I ort as originally
8	AFFIX NOTARY STA	ibed before me, by the sa	and Ch	Semiannual reports: report not later that the report as swear, or affirm, the filled was made in	orts: I swear or a faith and without information contain I swear, or affirm, an the 14th busine originally filed is in that any error or on good faith. Mr. Lance Scongnature of Campa	affirm, that the ori an intent to misle ned in the report. that I am filing thi ss day after the d naccurate or incon nission in the repo	ginal report ad or to is corrected ate I learned nplete. I ort as originally

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

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

			1 Filer ID	2 Total pages filed:
Th	e MPAC Instruction	Guide explains how to complete this form.	(Ethics Commission Filers) 00028200	9
3	COMMITTEE NAME		00028200	055105 1105 0111 1/
ľ		s & Contractors, Inc., Texas Coastal Bend	PAC	OFFICE USE ONLY
	7.550ciatea Daliaei	de Contractors, me., rexas Coastar Bena	17.0	Date Received
				ELECTRONICALLY FILED
				10/14/2024
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP	
	ADDRESS	7433 Leopard St.		
	Change of Address	Corpus Christi, TX 78409		Date Hand-delivered or Date Postmarked
5	CAMPAIGN	MS / MRS / MR FIRST	MI	1
	TREASURER NAME	Mr. Lance Sco	ott	Receipt # Amount
	10 WIL			
		NICKNAME	CLIED	Date Processed
		NICKNAME LAST	SUFFIX	
		Lewis		Date Imaged
_				<u></u>
6	CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY; ST.	ATE; ZIP CODE
	STREET	2033 FM 2725		
	ADDRESS (Residence or Business)			
	,	Ingleside, TX 78362		
7	CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; ST	ATE; ZIP CODE
	TREASURER MAILING	2033 FM 2725		
	ADDRESS			
	Change of Address	Ingleside, TX 78362		
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION	
ľ	TREASURER		LATENSION	
	PHONE	(361) 523-9992		
9	REPORT TYPE			
ľ		X Monthly	10th day after campaign treasurer termination	Dissolution (Attach PAC-DR)
_	MONITHIN		trousurer termination	
10	MONTHLY REPORT FILING	January 5 April	5 🔲 July 5	X October 5
	DEADLINE		<u>-</u>	
		February 5 May !	5 August 5	November 5
		March 5 June	5 September 5	December 5
<u> </u>				
11	PERIOD COVERED	Month Day Year	HROUGH Month	Day Year
		08/26/2024	09/25/2	2024
		GO T	O PAGE 2	

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Associated Builders	& Contractors, Inc., Texas	s Coastal Bend PAC	000282	00
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(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	1. TOTAL UNITEMIZE	D POLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	OR GUARANTEES OF LOANS, OR 1ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA			
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,505.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LA G PERIOD	ST DAY \$	4,608.65
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANDING LOANS AS C REPORTING PERIOD	F THE \$	0.00
6 AFFIDAVIT			I	
		I swear, or affirm, under penalty of true and correct and includes all in under Title 15, Election Code.	f perjury, that th Iformation requi	ne accompanying report is ired to be reported by me
		Mr. Lan	ice Scott Lewi	is
		Signature of	Campaign Trea	asurer
AFFIX NOTA	RY STAMP / SEAL ABOVE	v		
Sworn to and subscrib	ned hefore me, by the said		this the	day
		which, witness my hand and seal of office.	_, uno uno	au
<u> </u>		milet, water my hard and sear of effect.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of o	officer administering oath
J	•	3		3

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

			4 of 9
17 COMMITTI Associate	EE NAME ed Builders & Contractors, Inc., Texas Coastal Bend PAC	18 Filer ID 00028200	(Ethics Commission Filers)
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 2,505.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$
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 CONTRIBUTION:	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	\$ 209.27
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

	MONET	ARY POLITICAL CONTRIBUTIO	Ν	IS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 5/9	
2	FILER NAME Associated E	ILER NAME ssociated Builders & Contractors, Inc., Texas Coastal Bend PAC		3	Filer ID (Ethics Commission 00028200	n Filers)	
4	Date 08/26/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$600.00
8	Principal occu	Orange Grove , TX 78372 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)		
	Owner Date 08/28/2024	Contributor address; City; State; Zip Code		AO Sawing and Drilling	•	Amount of Contribution (\$)	\$100.00
	Principal occu Owner	Orange Grove, TX 78372 pation / Job title (See Instructions)		Employer (See Instructions AO Services Inc.	<u> </u> s)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_Arroyo, Jessica Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Corpus Christi , TX 78418 pation / Job title (See Instructions) count Manager		Employer (See Instructions Code Red Safety	<u> </u> s)		
	Date 09/04/2024	Full name of contributor out-of-state PAC (ID#:_ Brown, Lea Contributor address; City; State; Zip Code Corpus Christi , TX 78411)		Amount of Contribution (\$)	\$100.00
	Principal occu N/A	pation / Job title (See Instructions)		Employer (See Instructions N/A	<u>l</u> S)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_ Cabasos, Jorge Contributor address; City; State; Zip Code Pearsall , TX 78061				Amount of Contribution (\$)	\$45.00
	Principal occu Regional Dir	pation / Job title (See Instructions) ector		Employer (See Instructions Holes South Texas	s)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	S 		SCHEDUL	E A1
	The Instru	ction Guide explains how to	o complete this forn	n.	1	Total pages Schedule A1: Sch: 2/4 Rpt: 6/9	
2	FILER NAME Associated Builders & Contractors, Inc., Texas Coastal Bend PAC		1	Filer ID (Ethics Commission 00028200	n Filers)		
4	Date 09/04/2024	5 Full name of contributor Conway, Chris6 Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code		7	Amount of Contribution (\$)	\$60.00
		San Antonio , TX 78222					
8	Principal occu N/A	pation / Job title (See Instructions)		Employer (See Instructions N/A	s) 		
	Date 09/04/2024	Full name of contributor Conway , Nina Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$200.00
	Principal occu	Odem , TX 78370 pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	7		
	N/A	pation / 30b title (See mandellons)		Contractors Safety Coul			
	Date 08/28/2024	Full name of contributor Garcia, Matt Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$25.00
	Pointing Language	Corpus Christi , TX 78412		Facelores (Constructions	<u> </u>		
		pation / Job title (See Instructions) ommunity Relations		Employer (See Instructions TXOGA	s) 		
	Date 08/28/2024	Full name of contributor Garza , Lee Contributor address; City; State Sinton , TX 78387	out-of-state PAC (ID#: e; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu N/A	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 08/28/2024	Full name of contributor Herrera , Amber Contributor address; City; State Corpus Christi , TX 78418	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu N/A	pation / Job title (See Instructions)		Employer (See Instructions N/A	s)		
			1				

	MONET	ARY POLITICAL C	CONTRIBUTION	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	rn	n.	1	Total pages Schedule A1: Sch: 3/4 Rpt: 7/9	
2	FILER NAME Associated Builders & Contractors, Inc., Texas Coastal Bend PAC		3	Filer ID (Ethics Commission 00028200	n Filers)			
4	Date 09/04/2024	5 Full name of contributorJiminez , Rene6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	7	Amount of Contribution (\$)	\$20.00
	Delia dia al-	Corpus Christi , TX 78404			Faralas as (Osa lasta ation			
8	N/A	pation / Job title (See Instructions	9		Employer (See Instructions N/A	5)		
	Date 09/14/2024	Full name of contributor Kelly, Wayne Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	Agua Dulce, TX 78330 pation / Job title (See Instructions	s) [Employer (See Instructions	<u> </u>		
	Executive Di		,		Craft Training Center	-,		
	Date 09/14/2024	Full name of contributor McGowan, Codey Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code				Amount of Contribution (\$)	\$10.00
		McAllen , TX 78501						
	Principal occu CMT Superv	pation / Job title (See Instructions risor)		Employer (See Instructions Raba Kistner	5)		
	Date 09/14/2024	Full name of contributor Parker , Adriana Contributor address; City; St Corpus Christi, TX 78404	out-of-state PAC (ID#: ate; Zip Code			•	Amount of Contribution (\$)	\$100.00
	Principal occu Licensed Ag	pation / Job title (See Instructions ent	()		Employer (See Instructions New York Life Insurance		0	
	Date 09/04/2024	Full name of contributor Pickens , Bradley Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$100.00
	•	pation / Job title (See Instructions General Manager)		Employer (See Instructions American Steel & Suppl			
	- 3							

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 4/4 Rpt: 8/9	
2	FILER NAME Associated E	FILER NAME Associated Builders & Contractors, Inc., Texas Coastal Bend PAC		3	Filer ID (Ethics Commission 00028200	n Filers)
4	Date 08/28/2024	5 Full name of contributor out-of-state PAC (ID#:_ Roach , Mark 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_		Portland , TX 78374		_		
8	Sales	pation / Job title (See Instructions)	9 Employer (See Instructions Dealers Electric Supply	5)		
	Date 08/26/2024	Full name of contributor out-of-state PAC (ID#:_ Stivors , Travis Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$600.00
	Dringing Lagge	New Braunfels , TX 78130	Franklauser (Coo landausetinas	<u></u>		
	Estimator	pation / Job title (See Instructions)	Employer (See Instructions Keeley Construction	5)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#: Wranosky , Rachel Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
		Corpus Christi , TX 78418				
	Principal occu Branch Man	pation / Job title (See Instructions) ager	Employer (See Instructions Watermark Graphics	5)		
	Date 08/28/2024	Full name of contributor out-of-state PAC (ID#:_Young, Kent Contributor address; City; State; Zip Code Mathis , TX 78368			Amount of Contribution (\$)	\$100.00
	Principal occupation / Job title (See Instructions) Director of Business Development Employer (See Instructions) Dawson's Recycling &				posal	
	DIRECTOR OF B	nusinuss Development	Dawson's Recycling & L	15	oosai	

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: 1/1 Rpt: 9/9	Associated Builders & Contractors, Inc., Texas Coastal 00028200					
4 Date	5 Payee name					
09/11/2024	Clover					
6 Amount (\$)	7 Payee Address; City; State; Zip					
54.07	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	Fees Clover App Mntly Fee					
Date	Payee name					
09/03/2024	Frost Bank					
Amount (\$)	Payee Address; City; State; Zip					
38.76	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	Fees FDMS Settlement Fee					
Date	Payee name					
09/03/2024	Frost Bank					
Amount (\$)	Payee Address; City; State; Zip					
90.94	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.) Fees Bankcard Deposit Mntly Fees					
EXPENDITURE	Bankcard Deposit Whitiy Fees					
Date	Payee name					
09/18/2024	Treasury Mgmt Srvcs					
Amount (\$)	Payee Address; City; State; Zip					
25.50	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.) Fees Treasury Mgmt Services					
EXPENDITURE	Fees Treasury Mgmt Services					