



# MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC  
COVER SHEET PG 1

|   |  |   |  |
|---|--|---|--|
| <b>The MPAC Instruction Guide explains how to complete this form.</b>                         |  | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00028200 | <b>2</b> Total pages filed:<br>9       |
| <b>3</b> COMMITTEE NAME<br>Associated Builders & Contractors, Inc., Texas Coastal Bend PAC    |  | <b>OFFICE USE ONLY</b>                                      |  |
|   |  | Date Received<br><b>ELECTRONICALLY FILED</b><br>10/14/2024  |  |
| <b>4</b> COMMITTEE ADDRESS<br><br><input type="checkbox"/> Change of Address                  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP<br>7433 Leopard St.<br><br>Corpus Christi, TX 78409  |   | Date Hand-delivered or Date Postmarked |
| <b>5</b> CAMPAIGN TREASURER NAME  | MS / MRS / MR FIRST MI<br>Mr. Lance Scott  | Receipt #   | Amount                                 |
|   | NICKNAME LAST SUFFIX<br>Lewis  | Date Processed  | Date Imaged                            |
| <b>6</b> CAMPAIGN TREASURER STREET ADDRESS<br>(Residence or Business)                         | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>2033 FM 2725<br><br>Ingleside, TX 78362   |   |  |
| <b>7</b> CAMPAIGN TREASURER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>2033 FM 2725<br><br>Ingleside, TX 78362  |   |  |
| <b>8</b> CAMPAIGN TREASURER PHONE   | AREA CODE  | PHONE NUMBER  | EXTENSION                              |
|   | (361)  | 523-9992  |  |
| <b>9</b> REPORT TYPE  | <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)  |   |  |
| <b>10</b> MONTHLY REPORT FILING DEADLINE  | <input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input checked="" type="checkbox"/> October 5<br><input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5<br><input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5 |   |  |
| <b>11</b> PERIOD COVERED  | Month Day Year<br>08/26/2024   |   | THROUGH Month Day Year<br>09/25/2024   |

**GO TO PAGE 2**

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

|   |   |
|---|---|
| <b>12 COMMITTEE NAME</b><br>Associated Builders & Contractors, Inc., Texas Coastal Bend PAC | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00028200 |
|---|---|

|   |  |              |
|---|--|--------------|
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported |
|   |  | B. Opposed   |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported |
|   |  | B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |              |

|                               |   |             |
|-------------------------------|---|-------------|
| <b>15 CONTRIBUTION TOTALS</b> | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b><br><input type="checkbox"/> check here if this report qualifies for the higher itemization threshold | \$ 0.00     |
|                               | <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$ 2,505.00 |
| EXPENDITURE TOTALS            | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>   | \$ 0.00     |
|                               | <b>4. TOTAL POLITICAL EXPENDITURES</b>  | \$ 0.00     |
| CONTRIBUTION BALANCE          | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>   | \$ 4,608.65 |
| OUTSTANDING LOAN TOTALS       | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>  | \$ 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. Lance Scott Lewis  
\_\_\_\_\_  
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

# SUBTOTALS - MPAC

|   |   |                                |                            |
|---|---|--------------------------------|----------------------------|
| <b>17 COMMITTEE NAME</b><br>Associated Builders & Contractors, Inc., Texas Coastal Bend PAC |   | <b>18 Filer ID</b><br>00028200 | (Ethics Commission Filers) |
| <b>19 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE  |   | SUBTOTAL AMOUNT                |                            |
| 1.  | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                 | \$                             | 2,505.00                   |
| 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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                         | \$                             |                            |
| 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 checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS           | \$                             | 209.27                     |
| 15.   | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER       | \$                             |                            |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |  |
|--|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>                       |   | <b>1</b> Total pages Schedule A1:<br>Sch: 1/4 Rpt: 5/9         |
| <b>2</b> FILER NAME<br>Associated Builders & Contractors, Inc., Texas Coastal Bend PAC |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00028200       |
| <b>4</b> Date<br>08/26/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Anthony, Bryan<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Orange Grove , TX 78372 | <b>7</b> Amount of Contribution (\$)<br><br>\$600.00           |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Owner                  |   | <b>9</b> Employer (See Instructions)<br>AO Sawing and Drilling |
| Date<br>08/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Anthony, Bryan (Mr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Orange Grove, TX 78372              | Amount of Contribution (\$)<br><br>\$100.00                    |
| Principal occupation / Job title (See Instructions)<br>Owner                           |   | Employer (See Instructions)<br>AO Services Inc.                |
| Date<br>08/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Arroyo, Jessica<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi , TX 78418                | Amount of Contribution (\$)<br><br>\$100.00                    |
| Principal occupation / Job title (See Instructions)<br>Strategic Account Manager       |   | Employer (See Instructions)<br>Code Red Safety                 |
| Date<br>09/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Brown, Lea<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi , TX 78411                     | Amount of Contribution (\$)<br><br>\$100.00                    |
| Principal occupation / Job title (See Instructions)<br>N/A                             |   | Employer (See Instructions)<br>N/A                             |
| Date<br>08/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cabasos, Jorge<br><hr/> Contributor address; City; State; Zip Code<br><br>Pearsall , TX 78061                       | Amount of Contribution (\$)<br><br>\$45.00                     |
| Principal occupation / Job title (See Instructions)<br>Regional Director               |   | Employer (See Instructions)<br>Holes South Texas               |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                       |   | <b>1</b> Total pages Schedule A1:<br>Sch: 2/4 Rpt: 6/9    |
| <b>2</b> FILER NAME<br>Associated Builders & Contractors, Inc., Texas Coastal Bend PAC |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00028200  |
| <b>4</b> Date<br>09/04/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Conway, Chris<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>San Antonio , TX 78222 | <b>7</b> Amount of Contribution (\$)<br><br>\$60.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>N/A                    |   | <b>9</b> Employer (See Instructions)<br>N/A               |
| Date<br>09/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Conway , Nina<br><hr/> Contributor address; City; State; Zip Code<br><br>Odem , TX 78370                          | Amount of Contribution (\$)<br><br>\$200.00               |
| Principal occupation / Job title (See Instructions)<br>N/A                             |   | Employer (See Instructions)<br>Contractors Safety Council |
| Date<br>08/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Garcia, Matt<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi , TX 78412                 | Amount of Contribution (\$)<br><br>\$25.00                |
| Principal occupation / Job title (See Instructions)<br>Director of Community Relations |   | Employer (See Instructions)<br>TXOGA                      |
| Date<br>08/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Garza , Lee<br><hr/> Contributor address; City; State; Zip Code<br><br>Sinton , TX 78387                          | Amount of Contribution (\$)<br><br>\$25.00                |
| Principal occupation / Job title (See Instructions)<br>N/A                             |   | Employer (See Instructions)<br>N/A                        |
| Date<br>08/28/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Herrera , Amber<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi , TX 78418              | Amount of Contribution (\$)<br><br>\$20.00                |
| Principal occupation / Job title (See Instructions)<br>N/A                             |   | Employer (See Instructions)<br>N/A                        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |   |   |
|--|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                       |   | <b>1</b> Total pages Schedule A1:<br>Sch: 3/4 Rpt: 7/9    |
| <b>2</b> FILER NAME<br>Associated Builders & Contractors, Inc., Texas Coastal Bend PAC |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00028200  |
| <b>4</b> Date<br>09/04/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Jiminez , Rene<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Corpus Christi , TX 78404 | <b>7</b> Amount of Contribution (\$)<br><br>\$20.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>N/A                    |   | <b>9</b> Employer (See Instructions)<br>N/A               |
| Date<br>09/14/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Kelly, Wayne<br><hr/> Contributor address; City; State; Zip Code<br><br>Agua Dulce, TX 78330                          | Amount of Contribution (\$)<br><br>\$100.00               |
| Principal occupation / Job title (See Instructions)<br>Executive Director              |   | Employer (See Instructions)<br>Craft Training Center      |
| Date<br>09/14/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>McGowan, Codey<br><hr/> Contributor address; City; State; Zip Code<br><br>McAllen , TX 78501                          | Amount of Contribution (\$)<br><br>\$10.00                |
| Principal occupation / Job title (See Instructions)<br>CMT Supervisor                  |   | Employer (See Instructions)<br>Raba Kistner               |
| Date<br>09/14/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Parker , Adriana<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78404                  | Amount of Contribution (\$)<br><br>\$100.00               |
| Principal occupation / Job title (See Instructions)<br>Licensed Agent                  |   | Employer (See Instructions)<br>New York Life Insurance Co |
| Date<br>09/04/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Pickens , Bradley<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi, TX 78409                 | Amount of Contribution (\$)<br><br>\$100.00               |
| Principal occupation / Job title (See Instructions)<br>Purchasing General Manager      |   | Employer (See Instructions)<br>American Steel & Supply    |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |   |
|---|---|---|
| <b>The Instruction Guide explains how to complete this form.</b>                        |   | <b>1</b> Total pages Schedule A1:<br>Sch: 4/4 Rpt: 8/9          |
| <b>2</b> FILER NAME<br>Associated Builders & Contractors, Inc., Texas Coastal Bend PAC  |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00028200        |
| <b>4</b> Date<br>08/28/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Roach , Mark<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Portland , TX 78374 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00            |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Sales                   |   | <b>9</b> Employer (See Instructions)<br>Dealers Electric Supply |
| Date<br>08/26/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Stivors , Travis<br><hr/> Contributor address; City; State; Zip Code<br><br>New Braunfels , TX 78130          | Amount of Contribution (\$)<br><br>\$600.00                     |
| Principal occupation / Job title (See Instructions)<br>Estimator                        |   | Employer (See Instructions)<br>Keeley Construction              |
| Date<br>08/28/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Wranosky , Rachel<br><hr/> Contributor address; City; State; Zip Code<br><br>Corpus Christi , TX 78418        | Amount of Contribution (\$)<br><br>\$100.00                     |
| Principal occupation / Job title (See Instructions)<br>Branch Manager                   |   | Employer (See Instructions)<br>Watermark Graphics               |
| Date<br>08/28/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Young, Kent<br><hr/> Contributor address; City; State; Zip Code<br><br>Mathis , TX 78368                      | Amount of Contribution (\$)<br><br>\$100.00                     |
| Principal occupation / Job title (See Instructions)<br>Director of Business Development |   | Employer (See Instructions)<br>Dawson's Recycling & Disposal    |



# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

|   |   |   |
|---|---|---|
| 1 Total pages Schedule I:<br>Sch: 1/1 Rpt: 9/9                                      | 2 FILER NAME<br>Associated Builders & Contractors, Inc., Texas Coastal          | 3 Filer ID (Ethics Commission Filers)<br>00028200   |
| 4 Date<br>09/11/2024  | 5 Payee name<br>Clover  |   |
| 6 Amount (\$)<br>54.07<br><input type="checkbox"/> Expenditure from corporate funds | 7 Payee Address; City; State; Zip<br>415 N Mathilda Ave<br>Sunnyvale , CA 94085 |   |
| <b>PURPOSE OF EXPENDITURE</b>   | (a) Category (See instructions for examples of acceptable categories)<br>Fees   | (b) Description (See instructions regarding type of information required.)<br>Clover App Mntly Fee        |
| Date<br>09/03/2024  | Payee name<br>Frost Bank  |   |
| Amount (\$)<br>38.76<br><input type="checkbox"/> Expenditure from corporate funds   | Payee Address; City; State; Zip<br>2402 Leopard St<br>Corpus Christi , TX 78408 |   |
| <b>PURPOSE OF EXPENDITURE</b>   | (a) Category (See instructions for examples of acceptable categories)<br>Fees   | (b) Description (See instructions regarding type of information required.)<br>FDMS Settlement Fee         |
| Date<br>09/03/2024  | Payee name<br>Frost Bank  |   |
| Amount (\$)<br>90.94<br><input type="checkbox"/> Expenditure from corporate funds   | Payee Address; City; State; Zip<br>2402 Leopard St<br>Corpus Christi, TX 78408  |   |
| <b>PURPOSE OF EXPENDITURE</b>   | (a) Category (See instructions for examples of acceptable categories)<br>Fees   | (b) Description (See instructions regarding type of information required.)<br>Bankcard Deposit Mntly Fees |
| Date<br>09/18/2024  | Payee name<br>Treasury Mgmt Srvcs   |   |
| Amount (\$)<br>25.50<br><input type="checkbox"/> Expenditure from corporate funds   | Payee Address; City; State; Zip<br>2402 Leopard St<br>Corpus Christi , TX 78408 |   |
| <b>PURPOSE OF EXPENDITURE</b>   | (a) Category (See instructions for examples of acceptable categories)<br>Fees   | (b) Description (See instructions regarding type of information required.)<br>Treasury Mgmt Services      |