MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

			-	
Tł	ne MPAC Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00042961	2 Total pages filed: 36
3	COMMITTEE NAME		·	OFFICE USE ONLY
	Gulf States Toyota	Inc. State PAC		Date Received
				11/04/2024
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP	
	ADDRE33	1375 Enclave Pkwy.		
	_			
	Change of Address	Houston, TX 77077		Date Hand-delivered or Date Postmarked
5	CAMPAIGN	MS / MRS / MR FIRST	MI	
	TREASURER NAME	Mr. Laird M.		Receipt # Amount
	NAME			
				Date Processed
		NICKNAME LAST	SUF	FIX
		Doran		Date Imaged
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE)	; APT / SUITE #; CITY;	STATE; ZIP CODE
	TREASURER STREET	1375 Enclave Pkwy.		
	ADDRESS			
	(Residence or Business)	Houston, TX 77077		
7	CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY;	STATE; ZIP CODE
Ľ	TREASURER		APT/SOILE#, CITT,	STATE, ZIP CODE
	MAILING	1375 Enclave Pkwy.		
	ADDRESS			
	Change of Address	Houston, TX 77077		
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION	
	TREASURER PHONE	(713) 580-3635		
		(0) 000 0000		
9	REPORT TYPE	V Monthly	10th day after campaign	
		X Monthly	L treasurer termination	Dissolution (Attach PAC-DR)
10	MONTHLY			
	REPORT FILING	January 5 Api	il 5 🛛 🗌 July 5	October 5
	DEADLINE	February 5 Ma	y 5 🛛 August 5	X November 5
		March 5 Jur	e 5 September 5	December 5
11	PERIOD	Month Day Year	Mon	th Day Year
	COVERED	09/26/2024	THROUGH	5/2024
⊢				
			TO PAGE 2	
Fo	rms provided by Tex	as Ethics Commission www.e	ethics.state.tx.us	Version V4.1.0.48da51f7

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME				13 File	r ID	(Ethics Commission Filers)
Gulf States Toyota Inc.	State PAC			000	42961	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Rat	ael Anchia State Re	presentative		
(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	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANTEES (ADE ELECTRONICA	OF LOANS, ÒR ALLY)	HAN	\$	0.00
	2. TOTAL POLITICA	L CONTRIBUTION		NS)	\$	175,290.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPEN	DITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDITURE	6		\$	96,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING		AINTAINED AS OF THE	E LAST DAY	\$	287,872.85
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL / LAST DAY OF THE F			AS OF THE	\$	0.00
16 AFFIDAVIT					1	
		true ar	r, or affirm, under penal Id correct and includes a Title 15, Election Code.	all information i		
			М	r. Laird M. Do	oran	
				e of Campaign		er
AFFIX NOTARY	STAMP / SEAL ABOVE					
Sworn to and subscribed	before me, by the said			, this the		day
of						
Signature of officer ad	ministering oath	Printed name of offic	er administering oath	Title	e of office	r administering oath
Forms provided by Texas E	thics Commission	www.ethics	.state.tx.us			Version V4.1.0.48da51f7

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12 COMMITTEE NAME Gulf States Toyota Inc. Sta				13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. Sta	ate PAC				. , , , , , , , , , , , , , , , , , , ,
		-		00042961	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Elizabeth Campos State Repres	sentative	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Erin Gamez State Representati	ve	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mary Gonzalez State Represen	itative	
(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				

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. Sta	ate PAC				00042961	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jessica Gonzale	ez State Repres	sentative	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ana Hernandez	State Represe	ntative	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Oscar Longoria	State Represer	ntative	
(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.)					

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12 COMMITTEE NAME Gulf States Toyota Inc. Sta	ate PAC				13 Filer ID 00042961	(Ethics Commission Filers)
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Joseph Mood	y State Represen		
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Penny Shaw	State Representat	ive	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Sergio Munoz	z State Representa	ative	
(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.)					

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12 COMMITTEE NAME Gulf States Toyota Inc. Sta					13 Filer ID 00042961	(Ethics Commission Filers)
					00042901	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mary Ann Perez S	tate Represent	tative	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ana-Maria Ramos	State Represe	entative	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Richard Raymond	State Represe	entative	
(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.)					

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. St	ate PAC			00042961	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ramon Romero State Represe	ntative	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Terry Canales State Represent	ative	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Charles Cunningham State Rep	presentative	
(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.)				

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. Sta	ale PAC			00042961	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Paul Bettencourt State Senator		
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mayes Middleton State Senator		
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		James Frank State Representat	ive	
(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.)				

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12 COMMITTEE NAME Gulf States Toyota Inc. Sta	ate PAC				13 Filer ID 00042961	(Ethics Commission Filers)
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Jared Patterso	n State Represe		
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mike Schofield	State Represen	ntative	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Rhetta Bowers	State Represer	ntative	
(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.)					

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. Sta	ate PAC			00042961	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Yvonne Davis State Represent	ative	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Brent Hagenbuch State Senato	r	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Bryan Hughes State Senator		
(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.)				

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			13 Filer ID	(Ethics Commission Filers)
ate PAC			00042961	
1. Candidates (Identify by name or, if applicable, classify by party.)		Todd Hunter State Representati	ive	
	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.)				
1. Candidates (Identify by name or, if	A. Supported	Stan Kitzman State Representa	tive	
	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.)				
		Procks Landgraf State Deprese	ntativo	
		BIOOKS Lanugraf State Represe	intative	
	B. Opposed			
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
	B. Opposed			
3. Officeholders Assisted				
	 Candidates (Identify by name or, if applicable, classify by party.) Measures (Describe by date and location of election and nature of issue.) Officeholders Assisted (Identify by name or, if applicable, classify by party.) Candidates (Identify by name or, if applicable, classify by party.) Candidates (Identify by name or, if applicable, classify by party.) Candidates (Identify by name or, if applicable, classify by party.) Candidates (Identify by name or, if applicable, classify by party.) Candidates (Identify by name or, if applicable, classify by party.) Candidates (Identify by name or, if applicable, classify by party.) Candidates (Identify by name or, if applicable, classify by party.) Candidates (Identify by name or, if applicable, classify by party.) Candidates (Identify by name or, if applicable, classify by party.) Candidates (Identify by name or, if applicable, classify by party.) Candidates (Identify by name or, if applicable, classify by party.) A mature of issue.) Source of the parts of the par	1. Candidates (Identify by name or, if applicable, classify by party.)A. Supported2. Measures (Describe by date and location of election and nature of issue.)A. Supported3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)A. Supported1. Candidates (Identify by name or, if applicable, classify by party.)A. Supported2. Measures (Describe by date and location of election and nature of issue.)A. Supported3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)A. Supported3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)A. Supported3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)A. Supported3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)A. Supported1. Candidates (Identify by name or, if applicable, classify by party.)A. Supported2. Measures (Identify by name or, if applicable, classify by party.)A. Supported1. Candidates (Identify by name or, if applicable, classify by party.)A. Supported2. Measures (Describe by date and location of election and nature of issue.)A. Supported3. Officeholders (Describe by date and location of election and nature of issue.)A. Supported3. Officeholders (Describe by date and location of election and nature of issue.)B. Opposed3. Officeholders (Describe by date and location of election and nature of issue.)A. Supported <td>1. Candidates (Identify by name or, If applicable, classify by party.) A. Supported Todd Hunter State Representat B. Opposed B. Opposed 2. Measures (Oescribe by date and location of election and nature of issue.) A. Supported 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) A. Supported 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported 2. Measures (Describe by date and location of election and nature of issue.) A. Supported 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) A. Supported 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) A. Supported 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) A. Supported 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) A. Supported 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported Brooks Landgraf State Represe 2. Measures (Describe by date and nature of issue.) A. Supported B. Opposed 3. Officeholders A. Supported B. Opposed</br></br></br></br></br></br></br></br></br></br></br></br></br></br></br></td> <td>ate PAC 00042961 1. Candidates (dentify by name or, if applicable, classify by party.) A. Supported Todd Hunter State Representative 2. Measures (Describe by date and hoating of section and nature of section and pathodie, classify by party.) A. Supported Describe to the section and hoating of section and nature of section and pathodie, classify by party.) 3. Officeholders Assisted (dentify by name or, if applicable, classify by party.) A. Supported Stan Kitzman State Representative 2. Measures (dentify by name or, if applicable, classify by party.) B. Opposed Image: Classifier of the section and nature of sece.) 3. Officeholders Assisted (dentify by name or, if applicable, classify by party.) A. Supported Stan Kitzman State Representative 3. Officeholders Assisted (dentify by name or, if applicable, classify by party.) A. Supported B. Opposed 3. Officeholders Assisted (dentify by name or, if applicable, classify by party.) A. Supported B. Opposed 1. Candidates (dentify by name or, if applicable, classify by party.) A. Supported B. Opposed 2. Measures (Describe by date and bocation of election and nature of issue.) A. Supported B. Opposed 2. Measures (Describe by date and bocation of election and nature of issue.) A. Supported B. Opposed 3. Officeholders A. Supported</td>	1. Candidates (Identify by name or, If applicable, classify by party.) A. Supported Todd Hunter State Representat B. Opposed B. Opposed 2. Measures (Oescribe by date and location of election and nature of issue.) A. Supported 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) A. Supported 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported 2. Measures (Describe by date and location of election and nature of issue.) A. Supported 3. Officeholders Assisted 	ate PAC 00042961 1. Candidates (dentify by name or, if applicable, classify by party.) A. Supported Todd Hunter State Representative 2. Measures (Describe by date and hoating of section and nature of section and pathodie, classify by party.) A. Supported Describe to the section and hoating of section and nature of section and pathodie, classify by party.) 3. Officeholders Assisted (dentify by name or, if applicable, classify by party.) A. Supported Stan Kitzman State Representative 2. Measures (dentify by name or, if applicable, classify by party.) B. Opposed Image: Classifier of the section and nature of sece.) 3. Officeholders Assisted (dentify by name or, if applicable, classify by party.) A. Supported Stan Kitzman State Representative 3. Officeholders Assisted (dentify by name or, if applicable, classify by party.) A. Supported B. Opposed 3. Officeholders Assisted (dentify by name or, if applicable, classify by party.) A. Supported B. Opposed 1. Candidates (dentify by name or, if applicable, classify by party.) A. Supported B. Opposed 2. Measures (Describe by date and bocation of election and nature of issue.) A. Supported B. Opposed 2. Measures (Describe by date and bocation of election and nature of issue.) A. Supported B. Opposed 3. Officeholders A. Supported

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						9
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. Sta	ate PAC				00042961	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jeffrey Leach S	State Representa	tive	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Morgan Meyer	State Represent	ative	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Angela Paxton	State Senator		
(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.)					

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					-
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. Sta	ate PAC			00042961	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Kenneth Paxton Attorney Gen	eral	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Matt Shaheen State Represer	ntative	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Valoree Swanson State Repre	esentative	
(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.)				

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. Sta	ate PAC			00042961	()
-		A Cummented	T	00042001	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Tan Parker State Senator		
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Christina Morales State Repres	entative	
(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.)				
			Jacov Carrie State Depresente	tive	
COMMITTEE ACTIVITY	(Identify by name or, if applicable, classify by party.)		Josey Garcia State Representa	live	
(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.)				

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			13 Filer ID	(Ethics Commission Filers)
tate PAC			00042961	
1. Candidates (Identify by name or, if applicable, classify by party.)		Nicole Collier State Representa	tive	
	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.)				
1. Candidates (Identify by name or, if applicable, classify by party.)		John Bryant State Representati	ve	
	B. Opposed			
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
	B. Opposed			
 Officeholders Assisted (Identify by name or, if applicable, classify by party.) 				
1. Candidates (Identify by name or, if applicable, classify by party.)		Roland Gutierrez State Senator	-	
	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				
	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders 3. Officeholders (Describe by date and location of election and nature of issue.) 3. Officeholders	1. Candidates (identify by name or, if applicable, classify by party.)A. Supported2. Measures (Describe by date and location of election and nature of issue.)A. Supported3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)A. Supported1. Candidates (Identify by name or, if applicable, classify by party.)A. Supported2. Measures (Describe by date and location of election and nature of issue.)A. Supported3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)A. Supported3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)A. Supported1. Candidates (Identify by name or, if applicable, classify by party.)A. Supported3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)A. Supported1. Candidates (Identify by name or, if applicable, classify by party.)A. Supported1. Candidates (Identify by name or, if applicable, classify by party.)A. Supported2. Measures (Describe by date and location of election and nature of issue.)A. Supported2. Measures (Describe by date and location of election and nature of issue.)A. Supported3. Officeholders applicable, classify by party.)B. Opposed3. Officeholders (Describe by date and location of election and nature of issue.)A. Supported3. Officeholders (Describe by date and location of election and nature of issue.)B. Opposed3. Officeholders (Describe by date and locatio	1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported Nicole Collier State Representation (Identify by name or, if applicable, classify by party.) 2. Measures (Oescribe by date and location of election and nature of issue.) A. Supported 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) A. Supported John Bryant State Representation (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported John Bryant State Representation (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported Supported 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) A. Supported Roland Gutierrez State Senator (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported Roland Gutierrez State Senator (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported B. Opposed 3. Officeholders A. Supported B. Opposed B. Opposed	ate PAC 00042961 1. Candidates (identify by name or, if applicable, data and location of election and nature of issue.) A. Supported Image: Control of Con

FORM MPAC

Page 16 of 36

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. St	ate PAC			00042961	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Lois Kolkhorst State Senator		
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Charles Schwertner State Sena	ator	
(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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Boris Miles State Senator		
(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.)				

FORM MPAC ADDENDUM

						Page 17 of 36
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Gulf States Toyota Inc. St	ate PAC				0004296	1
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Jon Rosenthal	State Repres	entative	
(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.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Brandon Creig	hton State Se	nator	
(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.)					

FORM MPAC COVER SHEET PG 3

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17 COMMITTI	(Ethics Commission Filers)		
Gulf State			
	E SUBTOTALS		SUBTOTAL AMOUNT
NAME OF	SCHEDULE		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 175,000.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABC ORGANIZATION	IR	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7. X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$ 290.00
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (\$	
9.	SCHEDULE E: LOANS	\$	
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 96,000.00
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.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$

SUBTOTALS - MPAC

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 **1** Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 19/36 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Gulf States Toyota Inc. State PAC 00042961 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 10/25/2024 \$175,000.00 Friedkin, Thomas D. 6 Contributor address; City; State; Zip Code Houston, TX 77077 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) **Business Executive** Friedkin Companies, Inc.

NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C4

_							
	The Instruction Guide explains how to complete this form.			1	Total pages S Sch: 1/1 Rp	Schedule C4: ht: 20/36	
2	2 FILER NAME			3	Filer ID	(Ethics Commission Filers)	
Gulf States Toyota Inc. State PAC				00042961			
4	Date	5	Corporation / Labor Organization name	6	Amount (\$)		
	10/25/2024		Gulf States Toyota Inc.				290.00

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Ot of District
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/16 Rpt: 21/36	Gulf States Toyota Inc. State PAC00042961
4 Date	5 Payee name
09/26/2024	Ana Hernandez Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 15538
Expenditure from corporate funds	Houston, TX 77220
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/30/2024	Angela Paxton Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	5613 S. Woodcreek Circle
+_,	
Expenditure from corporate funds	McKinney, TX 75071
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/15/2024	Borris Miles for Texas State Senate
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	5302 Almeda Rd.
Expenditure from corporate funds	Houston, TX 77004
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food//Beverage Expense Polling Expense Travel of District Gift/Awards/Memorials Expense Printing Expense Travel Out of District
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/16 Rpt: 22/36	Gulf States Toyota Inc. State PAC00042961
4 Date	5 Payee name
09/30/2024	Brent Hagenbuch Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	2800 Shoreline Drive
Expenditure from corporate funds	Denton, TX 76210
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/30/2024	Brooks Landgraf Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	2331 Ladue Lane
Expenditure from corporate funds	Odessa, TX 79762
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/30/2024	Bryan Hughes for Senate Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	PO Box 450
Expenditure from corporate funds	Mineola, TX 75773
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundra Fees Office Overhead/Rental Expense Transportation Eq Food/Beverage Expense Polling Expense Travel in District By - Gift/Awards/Memorials Expense Printing Expense Travel Out of District	uipment & Related Expense
1 Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID	(Ethics Commission Filers)
Sch: 3/16 Rpt: 23/36	Gulf States Toyota Inc. State PAC00042961	
4 Date	5 Payee name	
09/26/2024	Charles Cunningham Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$500.00	PO Box 14352	
Expenditure from corporate funds	Humble, TX 77347	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office hel Office hel	d
Date	Payee name	
10/01/2024	Christina Morales Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	2901 Canal Street	
Expenditure from corporate funds	Houston, TX 77003	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Completing of Check if Austin, TX, officeholder living of Contribution 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office hel DH	d
Date	Payee name	
09/26/2024	David Mayes" Middleton Campaign"	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	PO Box 1526	
Expenditure from corporate funds	Galveston, TX 77553	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	ete Schedule ⊤.
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office hel OH	d

	EXPENDITURE CATEGORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME 3	Filer ID (Ethics Commission Filers)
Sch: 4/16 Rpt: 24/36	Gulf States Toyota Inc. State PAC	00042961
4 Date	Payee name	
09/26/2024	Elizabeth Liz' Campos Campaign"	
6 Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	1028 Rigsby	
Expenditure from corporate funds	San Antonio, TX 78210	
8 PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
09/26/2024	Erin Gamez Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	777 E. Harrison	
Expenditure from corporate funds	Suite C Brownsville, TX 78520	
PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
10/17/2024	Friends of Brandon Creighton	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	2257 N. Loop 336	
F f	STE 140-366	
Expenditure from corporate funds	Conroe, TX 77304	
PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Description	tride of Towar, Complete Cale duly T
EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	
1 Total pages Schedule F1:	2 Ell ED NAME (Ethios Commission Eilors)
, .	
Sch: 5/16 Rpt: 25/36	Gulf States Toyota Inc. State PAC 00042961
4 Date	5 Payee name
09/26/2024	Friends of Paul Bettencourt
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	1 E Greenway Plaza
ψ2,300.00	
Expenditure from	Ste. 225
corporate funds	Houston, TX 77046
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/14/2024	Gutierrez for Senate
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 15232
Expenditure from corporate funds	San Antonio, TX 78212
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	8
Date	Payee name
10/10/2024	House Democratic Campaign Committee
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 300095
Expenditure from corporate funds	Austin, TX 78703
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	n

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 6/16 Rpt: 26/36	Gulf States Toyota Inc. State PAC00042961	
4 Date	5 Payee name	
09/30/2024	James Frank Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$500.00	1206 Hatton Rd	
Expenditure from corporate funds	Wichita Falls, TX 76302	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
09/30/2024	Jared Patterson Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$10,000.00	4412 Sapphire Dr.	
Expenditure from corporate funds	Frisco, TX 75034	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
09/30/2024	Jeff Leach Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$5,000.00	800 Glen Rose Drive	
Expenditure from corporate funds	Allen, TX 75013	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District - Gift/Awards/Memorials Expense Printing Expense	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 7/16 Rpt: 27/36	Gulf States Toyota Inc. State PAC00042961	
4 Date	5 Payee name	
09/26/2024	Jessica Gonzalez Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$500.00	501 E 8th Street	
Expenditure from corporate funds	Dallas, TX 75203	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/07/2024	John Bryant Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	PO Box 140977	
Expenditure from corporate funds	Dallas, TX 75214	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution 	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/15/2024	Jon Rosenthal Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	8624 Highway 6 N. #340	
Expenditure from corporate funds	Houston, TX 77064	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/16 Rpt: 28/36	Gulf States Toyota Inc. State PAC00042961
4 Date	5 Payee name
09/26/2024	Joseph Moody Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	PO Box 920827
Expenditure from corporate funds	El Paso, TX 79902
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/01/2024	Josey Garcia Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	718 Amber Knoll
Expenditure from corporate funds	San Antonio, TX 78251
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/15/2024	Lois Kolkhorst for Senate
Amount (\$)	Payee address; City; State; Zip Code
\$15,000.00	PO Box 2546
Expenditure from corporate funds	Brenham, TX 77834
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 9/16 Rpt: 29/36	Gulf States Toyota Inc. State PAC 00042961	
4 Date	5 Payee name	
09/26/2024	Mary Ann Perez Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,000.00	5223 Sleepy Creek Dr.	
Expenditure from corporate funds	Houston, TX 77017	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Payee name	
09/26/2024	Mary Gonzalez Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	PO Box 450	
Expenditure from corporate funds	Clint, TX 79836	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution 	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
09/30/2024	Matt Shaheen Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	3917 Malton Dr.	
Expenditure from corporate funds	Plano, TX 75025	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food//Beverage Expense Polling Expense Travel of District Gift/Awards/Memorials Expense Printing Expense Travel Out of District	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 10/16 Rpt: 30/36	Gulf States Toyota Inc. State PAC00042961	
4 Date	5 Payee name	
09/30/2024	Mike Schofield Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$500.00	934 Hidden Canyon Rd.	
Expenditure from corporate funds	Katy, TX 77450	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
09/30/2024	Morgan Meyer Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	3838 Oak Lawn Avenue	
Expenditure from corporate funds	Suite 400 Dallas, TX 75219	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/07/2024	Nicole Collier Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	PO Box 24241	
Expenditure from corporate funds	Fort Worth, TX 76124	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense By - Gift/Awards/Memorials Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 11/16 Rpt: 31/36	Gulf States Toyota Inc. State PAC	00042961
4 Date	5 Payee name	
09/26/2024	Oscar Longoria Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,000.00	PO Box 4224	
Expenditure from corporate funds	Mission, TX 78573	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
09/26/2024	Penny Shaw Campaign Committee	
Amount (\$) \$500.00	Payee address;City;State;Zip CodeP.O. Box 925991	
Expenditure from corporate funds	Houston, TX 77292	
PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense 1
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought DH	Office held
Date	Payee name	
09/26/2024	Rafael Anchia Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	PO Box 4468	
Expenditure from corporate funds	Dallas, TX 75208	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense 1
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 12/16 Rpt: 32/36	Gulf States Toyota Inc. State PAC 00042961
4 Date	5 Payee name
09/26/2024	Ramon Romero Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 181
Expenditure from corporate funds	Fort Worth, TX 76101
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/26/2024	Ramos for Texas Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 852227
Expenditure from corporate funds	Richardson, TX 75085
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/30/2024	Rhetta Bowers Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	3526 Lakeview Pkwy. Ste B, #211
Expenditure from corporate funds	Rowlett, TX 75088
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Rhetta Bowers, STATE HOUSE 113th TX
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 13/16 Rpt: 33/36	Gulf States Toyota Inc. State PAC 00042961	
4 Date	5 Payee name	
09/26/2024	Richard E. Pena Raymond Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$500.00	PO Box 450349	
Expenditure from corporate funds	Laredo, TX 78045	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
09/26/2024	Sergio Munoz Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	PO Box 1257	
Expenditure from corporate funds	Mission, TX 78573	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
09/30/2024	Stan Kitzman Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,500.00	PO Box 553	
Expenditure from corporate funds	Pattison, TX 77466	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution 	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Glft/Awards/Memorials Expense Printing Expense Travel Out of District	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 14/16 Rpt: 34/36	Gulf States Toyota Inc. State PAC00042961	
4 Date	5 Payee name	
10/01/2024	Tan Parker For Texas Senate	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,500.00	PO Box 271741	
Expenditure from corporate funds	Flower Mound, TX 75027	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
09/26/2024	Terry Canales Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$5,000.00	310 S. Closner Blvd	
Expenditure from corporate funds	Edinburg, TX 78539	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution 	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/15/2024	Texans for Charles Schwertner	
Amount (\$)	Payee address; City; State; Zip Code	
\$5,000.00	PO Box 2448	
Expenditure from corporate funds	Georgetown, TX 78627	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 15/16 Rpt: 35/36	Gulf States Toyota Inc. State PAC 00042961
4 Date	5 Payee name
09/30/2024	Todd Hunter Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	445 Cape Henry
Expenditure from corporate funds	Corpus Christi, TX 78412
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/30/2024	Valoree Swanson Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	23020 Ammick Ct.
Expenditure from corporate funds	Spring, TX 77389
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/30/2024	W. Kenneth Paxton Jr. Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$15,000.00	PO Box 3476
Expenditure from corporate funds	McKinney, TX 75070
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 16/16 Rpt: 36/36	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Gulf States Toyota Inc. State PAC 00042961
4 Date 09/30/2024	5 Payee name Yvonne Davis Campaign
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code PO Box 763368
Expenditure from corporate funds	Dallas, TX 75376-3368
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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held