FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00040966 3 COMMITTEE NAME **OFFICE USE ONLY** HillCo PAC Date Received **ELECTRONICALLY FILED** 11/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 823 Congress #900 Change of Address Austin, TX 78701 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Jay NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Howard CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 823 Congress #900 STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** MAILING **ADDRESS** Change of Address TX **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 480-8962 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 09/26/2024 10/25/2024 **GO TO PAGE 2**

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
HillCo PAC			000409	966
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported See Schedule F-1		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	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	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	32,250.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	100,362.50
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	67,508.80
OUTSTANDING LOAN TOTALS	I	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.	rjury, that t nation req	the accompanying report is uired to be reported by me
		Jay H	loward	
		Signature of Car	mpaign Tre	easurer
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, th	nis the	day
of	_, 20, to certify	which, witness my hand and seal of office.		
Signature of officer ad	lministering oath	Printed name of officer administering oath	Title of	officer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				3 of 16
17 COMMI HillCo	(Ethics Commission Filers)			
19 SCHED NAME (SUBTOTAL AMOUNT	
1. X	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 32,250.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10. X	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 100,362.50
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 CONTRIBUTION	ONS	\$
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	orm.	ı	Total pages Schedule A1: Sch: 1/2 Rpt: 4/16
2	FILER NAME HillCo PAC			ı	Filer ID (Ethics Commission Filers) 00040966
4	Date 09/30/2024	5 Full name of contributor out-of-state PAC (ID#:) Barnes, Kelly 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$750.00
0	Dringing! gage	Austin, TX 78701	O Employer (Coa Instructions		
8	consultant	pation / Job title (See Instructions)	9 Employer (See Instructions)	5)	
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ HillCo Partners, LLC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$12,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date 09/30/2024	Full name of contributor out-of-state PAC (ID#:_ Hunter, Nelda Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$750.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)	
	consultant				
	Date 10/03/2024	Full name of contributor out-of-state PAC (ID#:_ Jones Family LP Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$10,000.00
	Principal occu	Irving, TX 75063 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)	
	Date 09/30/2024	Full name of contributor out-of-state PAC (ID#:_ Kuhlmann, Kate Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/16
2	FILER NAME HillCo PAC			3	Filer ID (Ethics Commission Filers) 00040966
4	Date 10/04/2024	 Full name of contributor out-of-state PAC (ID#: Lion Advisors LLC Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$) \$5,000.00
_	Point in all a servi	Dallas, TX 75225	Jo Frankrija (Operlands de Santa de San		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
	Date 09/30/2024	Full name of contributor out-of-state PAC (ID#: Mauro, Kyle Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 10/11/2024	Full name of contributor out-of-state PAC (ID#: Miller, William J. Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 09/30/2024	Full name of contributor out-of-state PAC (ID#: Solis, Eddie Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Date 09/30/2024	Full name of contributor out-of-state PAC (ID#: Webster, Todd Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$750.00
	Principal occu consultant	pation / Job title (See Instructions)	Employer (See Instructions)	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Reimbursement Solicitation/Fundraising Expense
Rental Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

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: 1/11 Rpt: 6/16	HillCo PAC 00040966
4 Date	5 Payee name
10/08/2024	Bhojani, Salman
	·
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 392
Expenditure from corporate funds	Euless, TX 76039
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder (Political Committee) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	campaign contribution
O Compulate ONLY if direct	Condidate/Office helder name Office accept
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
oxportantaro to sorione or o	
Date	Payee name
10/18/2024	Buckingham, Dawn
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	P. O. Box 342524
40,000.00	110.33%012021
Expenditure from	
corporate funds	Lakeway, TX 78734
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/09/2024	Campos, Liz
	·
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	1028 Rigsby
Expenditure from	
corporate funds	San Antonio, TX 78210
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling 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: 2/11 Rpt: 7/16	HillCo PAC 00040966
4 Date	5 Payee name
10/01/2024	Canales, Terry
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	2727 West University Drive
Expenditure from corporate funds	Edinburg, TX 78539
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign 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	Capriglione, Giovanni
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$1,000.00	P. O. Box 92007
Expenditure from	
corporate funds	Southlake, TX 76092
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign Contribution
	Campaign Continuation
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
	· ·
10/16/2024	Cortez, Philip
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	7919 Liberty Island
Expenditure from corporate funds	San Antonio, TX 78227
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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: 3/11 Rpt: 8/16	HillCo PAC 00040966
4 Date	5 Payee name
10/16/2024	Creighton, Brandon
	<u> </u>
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	2257 North Loop 336
Expenditure from	Suite 140-366
corporate funds	Conroe, TX 77304
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialities to beliefft G/OI	•
Date	Payee name
09/27/2024	Cunningham, Charles
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 14352
Expenditure from corporate funds	Humble, TX 77347
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin TV, officeholder living expenses
	Candidate/Officeholder/Political Committee
	Campaign Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/16/2024	Davis, Aicha
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	608 Cara Drive
Expenditure from corporate funds	Desoto, TX 75115
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

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: 4/11 Rpt: 9/16	HillCo PAC 00040966
4 Date	5 Payee name
10/16/2024	Garcia, Linda
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	539 W Commerce St.
- "	#4808
Expenditure from corporate funds	Dallas, TX 75208
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
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	Gonzalez, Mary
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P. O. Box 450
Expenditure from	
corporate funds	Clint, TX 79836
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Continuation
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	· ·
Date	Payee name
10/23/2024	Hancock, Kelly
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	P. O. Box 821349
Ψ1,000.00	· · · · · · · · · · · · · · · · · · ·
Expenditure from corporate funds	North Richland Hills, TX 76182
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Continuations
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/11 Rpt: 10/16	HillCo PAC 00040966
4 Date	5 Payee name
10/16/2024	Johnson, Charlene
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 925775
Expenditure from	
corporate funds	Houston, TX 77292
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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Campaign Command
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/08/2024	Lalani, Suleman (Dr.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 6514
, ,	
Expenditure from corporate funds	Houston, TX 77265
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contributions
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/01/2024	Landgraf, Brooks
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P. O. Box 13146
Expenditure from	
corporate funds	Odessa, TX 79768
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LA LABITORL	Candidate/Officeholder/Political Committee
	Campaign Contributions
Complete CALL V if direct	Condidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
•	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/11 Rpt: 11/16	HillCo PAC 00040966
4 Date	5 Payee name
10/08/2024	Latinas United PAC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,000.00	P.O. Box 7262
Expenditure from corporate funds	Houston, TX 77248
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	The terne continuation
Complete CNI V if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
10/02/2024	Leach, Jeff
Amount (\$)	Payee address; City; State; Zip Code
\$15,000.00	P. O. Box 866186
— Formanditure from	
Expenditure from corporate funds	Plano, TX 75086
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/16/2024	Martinez, Armando
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1402 East 8th Street
Expenditure from corporate funds	Weslaco, TX 78596
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 7/11 Rpt: 12/16	HillCo PAC 00040966
4 Date	5 Payee name
10/03/2024	Morales, Christina
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 6514
- Evpanditura from	
Expenditure from corporate funds	Houston, TX 77265
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contributions
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oi	
Date	Payee name
10/16/2024	Morales, Eddie
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	352 Hillcrest Boulevard
Expenditure from corporate funds	Eagle Pass, TX 78852
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder (Political Committee) Check if Austin, TX, officeholder living expense
	Campaign Contributions
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-i
Date	Payee name
10/09/2024	Ordaz, Claudia
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	P.O. Box 71738
Expenditure from	
corporate funds	El Paso, TX 79917
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LAI LIBITOIL	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
SAPORALEIO TO BOHOIL O/OI	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
	HillCo PAC 00040966
Sch: 8/11 Rpt: 13/16	HIIICU PAC 00040900
4 Date	5 Payee name
09/30/2024	Parker, Tan
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	P. O. Box 271741
41,000.00	11 0. Bun El II 12
Expenditure from	
corporate funds	Flower Mound, TX 75027-1741
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
10/23/2024	Patrick, Dan
Amount (\$)	
\$25,000.00	P. O. Box 685085
Expenditure from	
corporate funds	Austin, TX 78768
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
10/23/2024	Patrick, Dan
Amount (\$)	Payee address; City; State; Zip Code
\$25,000.00	P. O. Box 685085
Expenditure from	
corporate funds	Austin, TX 78768
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Candidate/Officenoider/Politica	cal Committee Legal Services Salaries/wages/Contract Labor OTHER (enter a category not liste The Instruction Guide explains how to complete this form.	ed above)		
1 Total pages Schedule F1:	: 2 FILER NAME 3 Filer ID (Ethics Com	mission Filers)		
Sch: 9/11 Rpt: 14/16	HillCo PAC 00040966			
4 Date	5 Payee name			
10/16/2024	Plesa, Mihaela			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,500.00	P.O. Box 796311			
Expenditure from corporate funds	Dallas, TX 75248			
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 Campaign Contribution			
	Campaign Contribution			
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH			
Date	Payee name			
10/01/2024	Rosenthal, Jon			
Amount (\$)	Payee address; City; State; Zip Code			
\$300.00	P.O. Box 667204			
Evanditure from				
Expenditure from corporate funds	Houston, TX 77266			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Food/Beverage Expense			
EXI ENDITORE	Check if Austin, TX, officeholder living expense			
	In-Kind Event for Jon Rosenthal			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held OH			
Date	Payee name			
10/10/2024	Schofield, Mike			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00	934 Hidden Canyon Road			
— Foresediture from				
Expenditure from corporate funds	Katy, TX 77450			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
	Candidate/Officeholder/Political Committee			
	Campaign Contribution			
Complete ONL V if direct	Candidate/Officeholder name Office sought Office held			
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 10/11 Rpt: 15/16	HillCo PAC 00040966			
4 Date	5 Payee name			
10/04/2024	Slawson, Shelby			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,000.00	910 Old Hico Rd			
Expenditure from				
corporate funds	Stephenville, TX 76401			
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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	Campaign Contribution			
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/01/2024	Spiller, David			
Amount (\$)	Payee address; City; State; Zip Code			
\$62.50	P.O. Box 447			
Ψ02.30	F.O. Box 441			
Expenditure from corporate funds	Jacksboro, TX 76458			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense			
	In-Kind Event for David Spiller			
Complete ONLY if direct	Candidata/Officeholder name Office county Office hold			
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				
Date	Payee name			
10/09/2024	Swanson, Valoree			
Amount (\$)	Payee address; City; State; Zip Code			
\$500.00	6046 FM 2920			
Ψ000.00	Suite 619			
Expenditure from				
corporate funds	Spring, TX 77379			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	Candidate/Officeriolder/Political Committee Campaign Contribution			
	Sampaign Continuation			
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·			
				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)		
Sch: 11/11 Rpt: 16/16	HillCo PAC	00040966		
4 Date 10/23/2024	5 Payee name Tinderholt, Tony			
	· •			
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip C 3800 Park Manor Court	ode		
\$1,500.00	3000 Faik Manor Court			
Expenditure from corporate funds	Arlington, TX 76017			
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	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Cardidate/Oniceriolaei/i onitical Committee	Campaign Contribution		
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held		
expenditure to benefit C/O	4			
Date	Payee name			
10/01/2024	VanDeaver, Gary			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$1,000.00	P.O. Box 866			
— E				
Expenditure from corporate funds	New Boston, TX 75570			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Candidate/Officeholder/Political Committee	Campaign Contribution		
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held		
expenditure to benefit C/O	4			
Date	Payee name			
10/04/2024	Walle, Armando			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$500.00	4826 Hollybrook Lane			
Expenditure from corporate funds	Houston, TX 77039			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.		
	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense Campaign Contribution		
		Campaign Continuation		
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	ught Office held		
expenditure to benefit C/OH				