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) 00015685 3 COMMITTEE NAME **OFFICE USE ONLY** Hotel PAC Date Received **ELECTRONICALLY FILED** 11/04/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 1701 West Ave. Change of Address Austin, TX 78701 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Mr. Scott K. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Joslove CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1701 West Ave. STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1701 West Ave. MAILING **ADDRESS** Change of Address Austin, TX 78701 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 474-2996 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 December 5 September 5 March 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

2 COMMITTEE NAME Hotel PAC			13 Filer ID 00015	
	1 Candidatas	A Cupported		
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	0. 14	A Cupported		
	Measures (Describe by date and location	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION TOTALS		O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR		
TOTALS	CONTRIBUTIONS N	IADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICA	qualifies for the higher itemization threshold L CONTRIBUTIONS		
		DGES, LOANS, OR GUARANTEES OF LOANS)	\$	536.25
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	2,400.00
CONTRIBUTION BALANCE		TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		31,997.07
OUTSTANDING LOAN TOTALS		TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		
6 AFFIDAVIT				
		I swear, or affirm, under penalty of true and correct and includes all in under Title 15, Election Code.	perjury, that formation req	the accompanying report is juired to be reported by me
		Mr. So	ott K. Joslov	10
		Signature of		
AFFIX NOTAE	RY STAMP / SEAL ABOVE	Signature or	Campaign m	easurei
AFFIX NOTAR	RY STAMP / SEAL ABOVE			
			_, this the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of	f officer administering oath
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SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

3 of 6				
17 COMMITTEE NAME 18 Filer ID Hotel PAC 00015685			(Ethics Commission Filers)	
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
1 / IVI	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$ 536.25	
	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
	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	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 2,400.00	
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 CONTRIBUTION	ONS	\$	
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

F			1	Total pages Schedule C1:
The Instruction Guide explains how to complete this form.				Sch: 1/2 Rpt: 4/6
2	FILER NAME Hotel PAC		3	Filer ID (Ethics Commission Filers) 00015685
4	Date 10/15/2024	 5 Corporation / Labor Organization name Archer Hotel Austin 6 Corporation / Labor Organization address; City; State; Zip Code 	7	Amount of contribution (\$) \$171.00
		Austin, TX 78758		
	Date 10/24/2024	Corporation / Labor Organization name Doubletree Hotel Austin Corporation / Labor Organization address; City; State; Zip Code		Amount of contribution (\$) \$47.00
		Austin, TX 78752		
	Date 10/15/2024	Corporation / Labor Organization name Hilton DFW Lakes Exec Conf Ctr Corporation / Labor Organization address; City; State; Zip Code		Amount of contribution (\$) \$50.00
		Grapevine, TX 76051		
	Date 10/03/2024	Corporation / Labor Organization name Hilton Houston North Corporation / Labor Organization address; City; State; Zip Code		Amount of contribution (\$) \$50.00
		Houston, TX 77060		
	Date 10/08/2024	Corporation / Labor Organization name Homewood Suites by Hilton Wichita Falls Corporation / Labor Organization address; City; State; Zip Code		Amount of contribution (\$) \$18.25
		Houston, TX 77027		
	Date 10/22/2024	Corporation / Labor Organization name JW Marriott San Antonio Hill Country Corporation / Labor Organization address; City; State; Zip Code		Amount of contribution (\$) \$50.00
		San Antonio, TX 78261		
	Date 10/22/2024	Corporation / Labor Organization name Renaissance Austin Hotel Corporation / Labor Organization address; City; State; Zip Code		Amount of contribution (\$) \$50.00
		Austin, TX 78759		

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instr	uction Guide explains how to complete this form.	1 Total pages Schedule C1: Sch: 2/2 Rpt: 5/6
2 FILER NAM Hotel PAC		3 Filer ID (Ethics Commission Filers) 00015685
4 Date 10/08/2024	 5 Corporation / Labor Organization name Royal Sonesta Hotel Houston 6 Corporation / Labor Organization address; City; State; Zip Code Houston, TX 77027 	7 Amount of contribution (\$) \$50.00
Date 10/23/2024	Corporation / Labor Organization name St. Regis Hotel Houston Corporation / Labor Organization address; City; State; Zip Code Houston, TX 77027	Amount of contribution (\$) \$50.00

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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
Gitt/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)

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: 1/1 Rpt: 6/6	Hotel PAC 00015685			
4 Date	5 Payee name			
10/22/2024	Creighton, Brandon			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,500.00	2257 N. Loop 335			
	Suite 140-366			
Expenditure from 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			
	Brandon Creighton Campaign			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/16/2024	Ganguly , Ashika			
Amount (\$)	Payee address; City; State; Zip Code			
\$450.00	P. O. Box 50512			
,				
Expenditure from corporate funds	Austin, TX 78763			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
_/	Candidate/Officeholder/Political Committee			
	Ashika Ganguly for Austin City Council			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
10/16/2024	Watson, Kirk			
Amount (\$)	Payee address; City; State; Zip Code			
\$450.00	P. O. Box 300903			
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			
	Mayor Kirk Watson's relection campaign			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
experiorare to benefit C/OI				