#### 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) 00015834 3 COMMITTEE NAME **OFFICE USE ONLY Texas Sport PAC** Date Received **ELECTRONICALLY FILED** 11/26/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** PO Box 5943 Change of Address Austin, TX 78763 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Mr. Patrick M. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Cowles CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 1211 Weeping Willow STREET **ADDRESS** (Residence or Business) San Antonio, TX 78232 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1211 Weeping Willow MAILING **ADDRESS** Change of Address San Antonio, TX 78232 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (210) 859-1306 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** 10/26/2024 11/25/2024

### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

		•		
2 COMMITTEE NAME Texas Sport PAC			13 Filer ID 00015834	(Ethics Commission Filers)
•	4 0	I Compared		-
4 COMMITTEE ACTIVITY	Candidates  (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	Officeholders     Assisted	Rep. Todd Hunter State Repre	esentative	
	(Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA			
	(OTHER THAN PLE	DGES, LOANS, OR GUARANTEES OF LOANS)	\$	300.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	15,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		DAY \$	55,410.55
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		THE \$	0.00
6 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.	rjury, that the nation require	accompanying report is ed to be reported by me
		Mr. Patrick	M. Cowles	
		Signature of Car		
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed hefore me, by the said	, th	nis the	day
		which, witness my hand and seal of office.		uuy
-				
Signature of officer	administering oath	Printed name of officer administering oath	Title of off	icer administering oath

### MONTHLY FILING GPAC REPORT: PURPOSE

### FORM MPAC **ADDENDUM**

					Page 3 of 9
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Sport PAC				00015834	
14 COMMITTEE ACTIVITY  (Attach lists on plain	Candidates (Identify by name or, if applicable, classify by party.)	<ul><li>A. Supported</li><li>B. Opposed</li></ul>			
paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Charlie Green State Repre	esentative	
COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (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.)		Rep. Carrie Isaac State Represe	entative	
COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if		Rep. Ryan Guillen State Repres	sentative	
	Assisted		Rep. Ryan Guillen State Repres	sentative	

### MONTHLY FILING GPAC REPORT: PURPOSE

### FORM MPAC ADDENDUM

					ADDENDOM
					Page 4 of 9
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Sport PAC				00015834	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(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.)		Rep. J.M. Lozano State Represe	entative	
COMMITTEE	Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (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.)		Rep. Morgan La Mantia State Ro	epresentative	

### **SUBTOTALS - MPAC**

# FORM MPAC COVER SHEET PG 3

					5 of 9
		EE NAME ort PAC	<b>18</b> Filer ID 00015834	(Ethics Commiss	sion Filers)
	HEDULE	SUBTOTAL	AMOUNT		
IAN	ME OF S	SCHEDULE		30510174	7 ((() () ()
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	300.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	15,000.00
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS				
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	Х	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	2,697.80
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 6/9
2	FILER NAME			3	Filer ID (Ethics Commission Filers) 00015834
4	Texas Sport PAC  Date  11/05/2024    S Full name of contributor		7	Amount of Contribution (\$) \$300.00	
		San Antonio, TX 78216			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)	

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### 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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 1/2 Rpt: 7/9	Texas Sport PAC 00015834
4 Date	5 Payee name
11/18/2024	Green, Charlie (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	P.O. Box 1440
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  Check if travel outside of Texas. Complete Schedule T.  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
11/18/2024	Isaac, Carrie (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	100Commons Road #7-125
Expenditure from corporate funds	Dripping Springs, TX 78620
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/OI	1
Date	Payee name
11/06/2024	La Mantia, Morgan (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	1324 E. Madison
, ,	
Expenditure from corporate funds	Brownsville, TX 78520
·	
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  Check if travel outside of Texas. Complete Schedule T.  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	

### 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

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

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: 2/2 Rpt: 8/9	Texas Sport PAC 00015834
4 Date	5 Payee name
11/14/2024	Lozano, J.M. (Rep.)
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 727 Arroyo Dr.
Expenditure from corporate funds	Kingsville, TX 78363
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  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
11/22/2024	Rep. Todd Hunter Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	445 Cape Henry
Expenditure from corporate funds	Corpus Christi, TX 78412
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 <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE I

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule I:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 1/1 Rpt: 9/9	Texas Sport PAC	00015834			
4 Date	5 Payee name				
11/20/2024	2 Dine 4				
6 Amount (\$)	7 Payee Address; City; State; Zip				
2,614.24	P.O. Box 6217				
Expenditure from corporate funds	Austin, TX 78762	_			
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories)  Event Expense	(b) Description (See instructions regarding type of information required.)  Catering / Serving Expense - Austin Fundraiser			
Date	Payee name				
11/04/2024	Cowles, Patrick (Mr.)				
Amount (\$)	Payee Address; City; State; Zip				
78.56	1211 Weeping Willow				
Expenditure from corporate funds	San Antonio, TX 78232				
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories)  Event Expense	(b) Description (See instructions regarding type of information required.) Office supplies for San Antonio fundraiser.			
EXPENDITURE					
Date	Payee name				
10/31/2024	Frost Bank				
Amount (\$)	Payee Address; City; State; Zip				
5.00	P.O. Box 1600				
Expenditure from corporate funds	San Antonio, TX 77892				
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.)			
OF EXPENDITURE	Accounting/Banking	Monthly Bank Service Charge			