#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00016259 3 COMMITTEE NAME **OFFICE USE ONLY** Stratus Committee for Responsible Government Date Received **ELECTRONICALLY FILED** 11/27/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 100 Congress Ave. #1300 Change of Address Austin, TX 78701 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Kenneth N. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Jones CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 100 Congress Ave. #1300 STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 100 Congress Ave. #1300 MAILING **ADDRESS** Change of Address Austin, TX 78701 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 435-2312 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 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 10/26/2024 11/25/2024

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## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME			-	13 Filer ID	(Ethics Commission Filers)
Stratus Committee for F	Responsible Governme	nt 		00016259	
.4 COMMITTEE ACTIVITY	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 Massures	A. Supported			
	Measures     (Describe by date and location	A. Supported			
	of election and nature of issue.)				
		B. Opposed			
	3. Officeholders				
	Assisted (Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION	1	DOLITICAL CONTRIBUTION	S (OTHER THAN	<u> </u>	
TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)      check here if this report qualifies for the higher itemization threshold			\$	0.00
	2. TOTAL POLITICA	·		\$	
	(OTHER THAN PLEI	OGES, LOANS, OR GUARANT	TEES OF LOANS)	9	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			DAY \$	409.11
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			HE \$	0.00
.6 AFFIDAVIT	l			<u> </u>	
		I swear, or affirm true and correct under Title 15, E	and includes all inforn	jury, that the a nation required	accompanying report is If to be reported by me
			Mr. Kennet	th N. Jones	
		-	Signature of Can	npaign Treasu	rer
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	before me. by the said		. th	is the	day
		which, witness my hand and se			
Signature of officer ad	ministering oath	Printed name of officer adminis	stering oath	Title of offic	eer administering oath

#### **SUBTOTALS - MPAC**

### FORM MPAC COVER SHEET PG 3 3 of 5

					3 of 5
17 COMMITTEE NAME 18 Filer ID					on Filers)
Stratus Committee for Responsible Government 00016259					
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE				SUBTOTAL AMOUNT	
1.	. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			\$	0.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	3. X SCHEDULE B: PLEDGED CONTRIBUTIONS			\$	0.00
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			\$	
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.	X	SCHEDULE E: LOANS		\$	0.00
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	0.00
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
				•	

PLEI	DGED CONTRIBU	TIONS			SCHEDULE B		
The Instruction Guide explains how to complete this form.  2 FILER NAME				1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5			
				3 Filer ID	(Ethics Commission Filers)		
Stratus	Committee for Responsible (	Government		0001625	9		
4 TOTAL	OF UNITEMIZED PLED	GES		\$	0.00		
<b>5</b> Date	6 Full name of pledgor out-of-state PAC (ID#:)		) 8 Amount of	9 In-kind description			
				pledge (\$)	) (If applicable)		
	7 Pledgor Address;	City; State; Zip C	ode				
				Check if tr	ravel outside of Texas. Complete Schedule T.		
10 Principal	occupation / Job title (See Instr	uctions)	11 Employer (See In	tructions)			

L	OANS					SCHEDULI	ΕE	
Th	The Instruction Guide explains how to complete this form.				1 Total pages Schedule E: Sch: 1/1 Rpt: 5/5			
	2 FILER NAME Stratus Committee for Responsible Government				3 Filer ID (Ethics Commission Filers) 00016259			
<b>4</b> TC	TAL OF UN	IITEMIZED LOANS			•	\$	0.00	
5 Dat	te of loan	7 Name of lender	out-of-state PA	C (ID#:	)	9 Loan Amount (\$)		
fina	ender a ancial titution?	8 Lender address; C	City; State;	Zip Code		10 Interest Rate		
						11 Maturity Date		
<b>12</b> Pri	ncipal occupatio	on / Job title (See Instructions	)	13 Employer (See Instructions)				
<b>14</b> De:	scription of Coll None	ateral		15 Check if personal funds we	ere deposited	d into political account (See Instructions)		
	IARANTOR FORMATION	17 Name of guarantor				19 Amount Guaranteed	d (\$)	
	not applicable	18 Guarantor address; C	City; State;	Zip Code				
<b>20</b> Priı	ncipal occupatio	on		21 Employer (See Instructions	5)			