

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00015685		2 Total pages filed: 7	
3 COMMITTEE NAME Hotel PAC				OFFICE USE ONLY Date Received ELECTRONICALLY FILED 12/02/2024 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 1701 West Ave. Austin, TX 78701				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI		
	NICKNAME	LAST	SUFFIX		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1701 West Ave. Austin, TX 78701				
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1701 West Ave. Austin, TX 78701				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)				
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input checked="" type="checkbox"/> December 5				
11 PERIOD COVERED	Month Day Year		THROUGH	Month Day Year	
	10/26/2024			11/25/2024	

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Hotel PAC	13 Filer ID (Ethics Commission Filers) 00015685
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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 POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,869.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Scott K. Joslove

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, 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 officer administering oath

SUBTOTALS - MPAC**FORM MPAC
COVER SHEET PG 3**
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17 COMMITTEE NAME Hotel PAC		18 Filer ID (Ethics Commission Filers) 00015685
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,678.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 191.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/7
2 FILER NAME Hotel PAC		3 Filer ID (Ethics Commission Filers) 00015685
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bhakta, Amit	7 Amount of Contribution (\$) \$511.00
	6 Contributor address; City; State; Zip Code Abilene, TX 79606	
8 Principal occupation / Job title (See Instructions) Hotel owner		9 Employer (See Instructions) Big Country Hotel
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hultquist, Christina	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Richmond, TX 77407	
Principal occupation / Job title (See Instructions) Regional Director of Hotel Sales		Employer (See Instructions) Aimbridge Hospitality
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobson, Grace	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Shenandoah, TX 77382	
Principal occupation / Job title (See Instructions) Hotelier		Employer (See Instructions) Jacobson Hospitality
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khoury, Elie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Leesburg, VA 20176	
Principal occupation / Job title (See Instructions) Senior Vice President, Operations		Employer (See Instructions) Interstate Hotels
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laasri, Nour	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Conroe, TX 77384	
Principal occupation / Job title (See Instructions) GM		Employer (See Instructions) Marriott Marquis Houston

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/7
2 FILER NAME Hotel PAC		3 Filer ID (Ethics Commission Filers) 00015685
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laxmidas, Janardan <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$365.00
8 Principal occupation / Job title (See Instructions) Hotelier		9 Employer (See Instructions) Amzim Global Investments, LP
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masters, Dhiren <hr/> Contributor address; City; State; Zip Code Arlington, TX 76006	Amount of Contribution (\$) \$501.00
Principal occupation / Job title (See Instructions) Hotelier		Employer (See Instructions) The Lion Group DFW
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Alkesh "Alex" <hr/> Contributor address; City; State; Zip Code Palestine, TX 75801	Amount of Contribution (\$) \$101.00
Principal occupation / Job title (See Instructions) Hotel owner		Employer (See Instructions) Hampton I & S
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schaefer, John <hr/> Contributor address; City; State; Zip Code Houston, TX 77002	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) GM		Employer (See Instructions) Hyatt Regency Houston
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Paul <hr/> Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Hotelier		Employer (See Instructions) Landry's, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/7
2 FILER NAME Hotel PAC		3 Filer ID (Ethics Commission Filers) 00015685
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, JC <hr/> 6 Contributor address; City; State; Zip Code Glen Rose, TX 76043	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Hotel Owner		9 Employer (See Instructions) Best Western

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/1 Rpt: 7/7
2 FILER NAME Hotel PAC		3 Filer ID (Ethics Commission Filers) 00015685
4 Date 11/19/2024	5 Corporation / Labor Organization name Courtyard Richardson Spring Valley	7 Amount of contribution (\$) \$37.25
	6 Corporation / Labor Organization address; City; State; Zip Code Richardson, TX 75081	
Date 11/01/2024	Corporation / Labor Organization name Embassy Suites Houston Downtown	Amount of contribution (\$) \$50.00
	Corporation / Labor Organization address; City; State; Zip Code Houston, TX 77010	
Date 10/30/2024	Corporation / Labor Organization name Hampton Inn & Suites Austin Airport	Amount of contribution (\$) \$25.50
	Corporation / Labor Organization address; City; State; Zip Code Austin, TX 78744	
Date 11/14/2024	Corporation / Labor Organization name Hyatt Place El Paso Airport	Amount of contribution (\$) \$28.25
	Corporation / Labor Organization address; City; State; Zip Code El Paso, TX 79905	
Date 11/01/2024	Corporation / Labor Organization name Marriott Houston North Greenspoint	Amount of contribution (\$) \$50.00
	Corporation / Labor Organization address; City; State; Zip Code Houston, TX 77060	