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) 00066105 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Latino Conservatives PAC Date Received **ELECTRONICALLY FILED** 12/03/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P. O. Box 130853 Change of Address Houston, TX 77219-0853 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Mr. Hector G. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Longoria CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 642 Heights Blvd. STREET **ADDRESS** (Residence or Business) Houston, TX 77007 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 642 Heights. Blvd. MAILING **ADDRESS** Change of Address Houston, TX 77007 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 561-3334 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

Month

10/26/2024

Day

Year

11 PERIOD

COVERED

THROUGH

Month

11/25/2024

Day

Year

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME 13 File						
Texas Latino Conserva	tives PAC			0006	6105	
4 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	A. Supported				
	(Describe by date and location of election and nature of issue.)	1				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if					
	applicable, classify by party.)	<u> </u>				
.5 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	OR GUARANTEE	ICALLY)		\$	0.00
	2. TOTAL POLITICA		ONS R GUARANTEES OF LOANS)		\$	0.00
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURES				\$	0.00
TOTALO	4. TOTAL POLITICA	AL EXPENDITUR	RES			0.00
				ľ	Φ	999.96
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			ST DAY	\$	1,496.82
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			OF THE	\$	0.00
6 AFFIDAVIT	I			<u> </u>		
		true	vear, or affirm, under penalty o e and correct and includes all in er Title 15, Election Code.	f perjury, tha nformation re	t the ac quired	companying report is to be reported by me
			Mr Hoo	etor G. Long	oria	
	Mr. Hector G. L Signature of Campaig					
AFFIX NOTARY	STAMP / SEAL ABOVE		Orginature of	Campaign	rousure	
			band and and of office	_, this the		day
01	_, 20, to certify \	wnich, withess my	nand and seal of office.			
Signature of officer ad	ministering oath	Printed name of o	fficer administering oath	Title	of office	er administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				3 of 4
17 COMN		EE NAME ino Conservatives PAC	18 Filer ID 00066105	(Ethics Commission Filers)
19 SCHE NAME		SUBTOTAL AMOUNT		
1.		\$		
2.		\$		
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 999.96
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	DNS	\$
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

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
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 (other a cottographed listed above)

Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)			
		lains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
Sch: 1/1 Rpt: 4/4	Texas Latino Conservatives PAC		00066105			
4 Date	5 Payee name					
11/04/2024	Facebook					
6 Amount (ft)	7 Dayson addresses City	State: Zin Code				
6 Amount (\$)		State; Zip Code				
\$900.00	1 Hacker Way					
Expenditure from corporate funds	Menlo Park, CA 94025					
<u> </u>		(a)				
8 PURPOSE OF	(a) Category (See Categories listed at the top of the		(5			
EXPENDITURE	Advertising Expense	, <u> </u>	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Voter Educat				
		Voter Educat	ion videos			
9 Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held			
expenditure to benefit C/O	1					
Date	Payee name					
	· ·					
11/12/2024	Facebook					
Amount (\$)	Payee address; City;	State; Zip Code				
\$99.96	1 Hacker Way					
Expenditure from	Monlo Bark, CA 04025					
corporate funds	Menlo Park, CA 94025					
PURPOSE	(a) Category (See Categories listed at the top of the					
OF EXPENDITURE	Advertising Expense	<u> </u>	Check if travel outside of Texas. Complete Schedule T.			
		<u> </u>	Check if Austin, TX, officeholder living expense			
		Voter Educat	ion Videos			
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held			
expenditure to benefit C/O	4					