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) 00084763 3 COMMITTEE NAME **OFFICE USE ONLY DEC PAC** Date Received **ELECTRONICALLY FILED** 12/03/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 1 E Greenway Plaza Ste 225 Change of Address Houston, TX 77046 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Chris NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Sallese CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1 E Greenway Plaza Ste 225 STREET **ADDRESS** (Residence or Business) Houston, TX 77046 **CAMPAIGN** STREET ADDRESS OR PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1 E. Greenway Plaza Ste. 225 MAILING **ADDRESS** Change of Address Houston, TX 77046 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 526-3399 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

10 00MMTTTT			Ī	40 5% 15	(Fabine Commission Files)
L2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
DEC PAC				00084763	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Ann J	ohnson State Represent	ative	
(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			
	3. Officeholders				
	Assisted (Identify by name or, if applicable, classify by party.)				
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIB OR GUARANTEES OF MADE ELECTRONICALL qualifies for the higher item	.Y)	\$	0.00
	2. TOTAL POLITICA	·		\$	
	(OTHER THAN PLE	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			0.00
	4. TOTAL POLITICA	4. TOTAL POLITICAL EXPENDITURES		\$	9,850.00
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		DAY \$	18,162.12
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					
		true and	or affirm, under penalty of pe correct and includes all inform e 15, Election Code.	rjury, that the a	accompanying report is d to be reported by me
			Chris	Sallese	
			Signature of Car		rer
AFFIX NOTA	RY STAMP / SEAL ABOVE		orginature or ear	mpaigir rroada	
			+1-	aic the	day
	ped before me, by the said, 20, to certify the said, the said			iis trie	day
01		which, watess my halia	and sear of office.		
Signature of officer	administering oath	Printed name of officer	administering oath	Title of office	cer administering oath

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC ADDENDUM

						Page 3 of 8
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
DEC PAC					00084763	3
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported B. Opposed	Mark Henry (Galveston County	Judge	
report if necessary.)	2. Measures (Describe by date and	A. Supported				
	location of election and nature of issue.)	B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jimmy Sylvia	Chambers Count	ty Judge	
(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.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Darrell Apffel	Galveston Count	y Commissione	er
(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				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

			13 Filer ID	(Ethics Commission Filers)
			00084763	}
A. Supported me or, if ssify by party.) B. Opposed	Robert Walker	Montgomery Col	unty Commiss	ioner
A. Supported ate and ction and)				
B. Opposed				
olders d me or, if ssify by party.)				
ates me or, if ssify by party.) A. Supported	Lesley Briones	Harris County C	ommissioner	
B. Opposed				
A. Supported ate and ction and)				
B. Opposed				
olders d me or, if ssify by party.)				
A. Supported me or, if ssify by party.)	Brandon Creigh	nton State Senat	or	
B. Opposed				
es A. Supported atte and ction and b.)				
B. Opposed				
olders d me or, if ssify by party.)				
	d me or, if ssify by party.) Ates me or, if ssify by party.) A. Supported B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed	d me or, if ssify by party.) A. Supported Brandon Creight Bra	the period or, if safety by party.) A. Supported Brandon Creighton State Senations or, if safety by party.) B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed	the period or, if safety by party.) A. Supported Brandon Creighton State Senator B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed

SUBTOTALS - MPAC COVER SHEET PG 3 5 of 8 COMMITTEE NAME DEC PAC SCHEDULE SUBTOTALS SUBTOTAL AMOUNT

DEC PAC		00084763	(Etnics Commission Filers)
19 SCHEDULE SUBTOTA NAME OF SCHEDULE	SUBTOTAL AMOUNT		
1. SCHEDUI	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		
2. SCHEDUI	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		
3. SCHEDUI	LE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDUI ORGANIZ	LE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ATION	PR	\$
	LE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA RGANIZATION	ATION OR	\$
6. SCHEDUI	LE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$
7. SCHEDUI ORGANIZ	LE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ATION		\$
8. SCHEDUI	LE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$
9. SCHEDUI	LE E: LOANS		\$
10. X SCHEDUI	LE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 9,850.00
11. SCHEDUI	LE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS			\$
13. SCHEDUI	13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDUI	14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$
15. SCHEDUI TO FILER	LE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F	RETURNED	\$

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

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: 1/3 Rpt: 6/8	DEC PAC 00084763
4 Date	5 Payee name
10/29/2024	Ann Johnson Campaign
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 56386
Expenditure from corporate funds	Houston, TX 77256
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
	Political Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/31/2024	Darrell Apffel Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 3082
Expenditure from corporate funds	League City, TX 77574
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
	Political Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/15/2024	Friends Of Brandon Creighton
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	2257 N. Loop 336 Suite 140-366
Expenditure from corporate funds	Conroe, TX 77304
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
	Political Contribution
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	y

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
4 7 . 1	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 2/3 Rpt: 7/8	DEC PAC 00084763
4 Date	5 Payee name
10/30/2024	Judge Jimmy Sylvia Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,100.00	5341 Old FM 565 N
Expenditure from corporate funds	Cove, TX 77523
	1
8 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 Candidate/Officeholder (Political Committee) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Political Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Power name
10/29/2024	Payee name
	Judge Mark Henry Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	12900 FM 3436 Rd
Expenditure from	
corporate funds	Dickinson, TX 77539
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Political Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experioritine to benefit C/O	
Date	Payee name
11/04/2024	Lesley Briones Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO box 56386
+=,555.00	
Expenditure from	Houston, TV 77256
corporate funds	Houston, TX 77256
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
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
	Candidate/Onicenoider/Political Committee Political Contribution
	Totaloa Contribution
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
, .,	11: 0

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

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		
1 Total pages Schedule F1: Sch: 3/3 Rpt: 8/8	2 FILER NAME DEC PAC 3 Filer ID (Ethics Commission Filers) 00084763	
4 Date 11/01/2024 6 Amount (\$)	5 Payee name Robert Walker Campaign 7 Payee address; City; State; Zip Code	
\$1,750.00	PO Box 558	
Expenditure from corporate funds	Pinehurst, TX 77362	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Political Contribution	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	