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) 00088813 3 COMMITTEE NAME **OFFICE USE ONLY** Houston Pilots PAC Date Received **ELECTRONICALLY FILED** 12/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 203 DEERWOOD GLEN DRIVE Change of Address DEER PARK, TX 77536 Date Hand-delivered or Date Postmarked **CAMPAIGN** MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Justin NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged **Phillips** CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE TREASURER 205 Pennsylvania Ave SE STREET **ADDRESS** (Residence or Business) Washington, DC 20003 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 205 Pennsylvania Ave SE MAILING **ADDRESS** Change of Address Washington, DC 20003 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (202) 543-8345 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

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

| 12 COMMITTEE NAME | | | 13 Filer ID | (Ethics Commission Filers) |
|---|--|--|-----------------------------------|--|
| Houston Pilots PAC | | | 0008881 | 3 |
| 14 COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Carol Alvarado State Senator | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | |
| | 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 | 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 | IL CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 15,900.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED | POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICA | L EXPENDITURES | \$ | 48,002.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL (OF THE REPORTIN | CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD | DAY \$ | 195,126.12 |
| OUTSTANDING LOAN TOTALS | | AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD | THE \$ | 0.00 |
| 16 AFFIDAVIT | <u> </u> | | | |
| | | I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code. | erjury, that the mation requir | accompanying report is ed to be reported by me |
| | | Justin | ı Phillips | |
| | | Signature of Ca | ımpaign Treas | surer |
| AFFIX NOTAR | Y STAMP / SEAL ABOVE | | | |
| Sworn to and subscribe | d before me, by the said | , t | his the | day |
| of | , 20, to certify | which, witness my hand and seal of office. | | |
| | | | | |
| Signature of officer a | dministering oath | Printed name of officer administering oath | Title of of | ficer administering oath |

| | B. Opposed A. Supported B. Opposed B. Opposed | 13 Filer ID (Ethics Commission Filers) 00088813 Senator |
|---|--|--|
| ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date a location of election nature of issue.) 3. Officeholde Assisted (Identify by name o applicable, classify COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Identify by name o applicable, classify 2. Measures (Describe by date a location of election applicable, classify | B. Opposed A. Supported B. Opposed B. Opposed | |
| ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date a location of election nature of issue.) 3. Officeholde Assisted (Identify by name o applicable, classify COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Identify by name o applicable, classify 2. Measures (Describe by date a location of election applicable, classify | B. Opposed A. Supported B. Opposed B. Opposed | Senator |
| paper to complete this report if necessary.) 2. Measures (Describe by date a location of election nature of issue.) 3. Officeholder Assisted (Identify by name of applicable, classify) COMMITTEE ACTIVITY 1. Candidates (Identify by name of applicable, classify) (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date a location of election) | A. Supported B. Opposed | |
| (Describe by date a location of election nature of issue.) 3. Officeholder Assisted (Identify by name of applicable, classify) COMMITTEE ACTIVITY 1. Candidates (Identify by name of applicable, classify) (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date a location of election of election) | B. Opposed | |
| 3. Officeholde Assisted (Identify by name o applicable, classify COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date a location of election | B. Opposed | |
| Assisted (Identify by name o applicable, classify) COMMITTEE ACTIVITY 1. Candidates (Identify by name o applicable, classify) (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date a location of election) | | |
| Assisted (Identify by name o applicable, classify) COMMITTEE ACTIVITY 1. Candidates (Identify by name o applicable, classify) (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date a location of election) | ers | |
| COMMITTEE ACTIVITY 1. Candidates (Identify by name o applicable, classify) (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date a location of election) | or, if | |
| ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date a location of election | | etor. |
| paper to complete this report if necessary.) 2. Measures (Describe by date a location of election | or, if | atoi |
| (Describe by date a location of election | B. Opposed | |
| | | |
| | B. Opposed | |
| Officeholde Assisted (Identify by name o applicable, classify | or, if | |
| COMMITTEE 1. Candidates | A. Supported Joan Huffman State Sena | ator |
| ACTIVITY ((Identify by name o applicable, classify | or, if by party.) | |
| (Attach lists on plain paper to complete this report if necessary.) | B. Opposed | |
| 2. Measures (Describe by date a location of election nature of issue.) | A. Supported | |
| | B. Opposed | |
| 3. Officeholde Assisted | | |
| (Identify by name o applicable, classify | or, if | |

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|---|---|--------------|-----------------|-------------------|-------------|----------------------------|
| 12 COMMITTEE NAME | | | | | 13 Filer ID | (Ethics Commission Filers) |
| Houston Pilots PAC | | | | | 00088813 | |
| 14 COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | | l Lois Kolkhors | t State Senator | | |
| (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 | I | | | |
| | | 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 | d Mayes Middle | eton State Senato | r | |
| (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 | i | | | |
| | | 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 | Borris Miles | State Senator | | |
| (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 | i | | | |
| | | B. Opposed | | | | |
| | Officeholders Assisted (Identify by name or, if | | | | | |

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|---|---|-----------|------------|-------------|---------------|-------------|----------------------------|
| 12 COMMITTEE NAME | | | | | | 13 Filer ID | (Ethics Commission Filers) |
| Houston Pilots PAC | | | | | | 00088813 | |
| 14 COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | ted Charle | es Perry S | State Senator | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Oppose | ed . | | | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Suppor | ted | | | | |
| | | B. Oppose | ed | | | | |
| | Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | | | |
| COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | ted Jeff E | Barry State | Representativ | ve | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Oppose | ed | | | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Suppor | ted | | | | |
| | | B. Oppose | ed | | | | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | | | |
| COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | ted Dustir | n Burrows | State Represo | entative | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Oppose | ed | | | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Suppor | ted | | | | |
| | | B. Oppose | ed | | | | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | | | |

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|---|---|--------------|---------|---------|-----------|----------|--------------|---|-------------|------------|
| 12 COMMITTEE NAME | | | | | | | 13 Filer ID | | cs Commissi | on Filers) |
| Houston Pilots PAC | | | | | | | 00088813 | 3 | | |
| 14 COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | Terry C | Canales | State Re | presenta | 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 | | | | | | | | |
| | Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | | | | | | |
| COMMITTEE | 1. Candidates | A. Supported | Charles | Cuppin | aham St | toto Den | rocontativo | | | |
| ACTIVITY | (Identify by name or, if applicable, classify by party.) | | Chanes | Cumin | gnam o | laie nep | Meserilative | | | |
| (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.) | | | | | | | | | |
| COMMITTEE | 1. Candidates | A. Supported | Yvonne | Davis | State Rei | presenta | ative | | | |
| ACTIVITY | (Identify by name or, if applicable, classify by party.) | | | 20.110 | | p. 000 | | | | |
| (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.) | | | | | | | | | |
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|---|---|--------------|---------|----------|--------------|-----------------|-------------|---------|------------|-----------|
| 12 COMMITTEE NAME | | | | | | | 13 Filer ID | (Ethics | Commission | ı Filers) |
| Houston Pilots PAC | | | | | | | 00088813 | | | |
| 14 COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | Mano | DeAyala | State Rep | oresenta | ative | | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | | | | | | |
| | Measures (Describe by date and | A. Supported | | | | | | | | |
| | location of election and nature of issue.) | | | | | | | | | |
| | | B. Opposed | | | | | | | | |
| | Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | | | | | | |
| COMMITTEE | Candidates | A. Supported | Harold | Dutton J | State Re | enreser | ntative | | | |
| ACTIVITY | (Identify by name or, if applicable, classify by party.) | | riaroid | Danono | . Otato i to | эр гооо: | ilati v | | | |
| (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.) | | | | | | | | | |
| COMMITTEE | 1. Candidates | A. Supported | Erin G | amez St | ate Repres | sentativ | e | | | |
| ACTIVITY | (Identify by name or, if applicable, classify by party.) | | 0 | | ж. т. т. т. | | • | | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | | | | | | |
| | 2. Measures (Describe by date and location of election and | A. Supported | | | | | | | | |
| | nature of issue.) | B. Opposed | | | | | | | | |
| | 3. Officeholders Assisted | | | | | | | | | |
| | (Identify by name or, if applicable, classify by party.) |) | | | | | | | | |
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| 12 COMMITTEE NAME | | | | | 13 Filer ID | (Ethics Commission Filers) |
| Houston Pilots PAC | | | | | 00088813 | |
| 14 COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | | Ryan Guillen | State Representa | tive | |
| (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 (Identify by name or, if applicable, classify by party.) | | | | | |
| COMMITTEE | Candidates | | Sam Harless | State Representa | tivo | |
| ACTIVITY | (Identify by name or, if applicable, classify by party.) | | Sum Fluidess | otate representa | uvc | |
| (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 | 1. Candidates | A. Supported | Caroline Harris | s Davila State Rep | presentative | |
| 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.) | | | | | |
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|---|---|-------------|---------------|----------------|------------------|-------------|----------------------------|
| 2 COMMITTEE NAME | | | | | | 13 Filer ID | (Ethics Commission Filers) |
| Houston Pilots PAC | | | | | | 00088813 | |
| L4 COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | | Supported | Todd Hunter S | State Represent | ative | |
| (Attach lists on plain paper to complete this report if necessary.) | | В. С | Opposed | | | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. S | Supported | | | | |
| | | В. С | Opposed | | | | |
| | Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | | | |
| COMMITTEE | + | +- | C: .::- artad | 25 - 1 1 - h - | - Chata Dani | | |
| COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | Supported | Charlene Johr | ıson State Repr | esentative | |
| (Attach lists on plain paper to complete this report if necessary.) | | В. С | Opposed | | | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. S | Supported | | | | |
| | | В. С | Opposed | | | | _ |
| | Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | | | |
| COMMITTEE | Candidates | | Supported | ^ 1 Loudorba | al: Ctata Banras | ntotivo | |
| ACTIVITY | (Identify by name or, if applicable, classify by party.) | | Supported | A.J. Louderba | CK State Repres | sentative | |
| (Attach lists on plain paper to complete this report if necessary.) | | В. С | Opposed | | | | |
| | Measures (Describe by date and location of election and nature of issue.) | A. S | Supported | | | | |
| | , | B. C | Opposed | | | | |
| | Officeholders Assisted (Identify by name or, if | | | | | | - |
| | applicable, classify by party.) | .) | | | | | |

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| 12 COMMITTEE NAME | | | | | 13 Filer ID | (Ethics Commission Filers) |
| Houston Pilots PAC | | | | | 00088813 | |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported B. Opposed | Joe Moody St | ate Representati | ive | |
| report if necessary.) | Measures (Describe by date and | A. Supported | | | | |
| | location of election and nature of issue.) | B. Opposed | | | | |
| | | | | | | |
| | Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | | |
| COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | Claudia Ordaz | State Represen | tative | |
| (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.) | | | | | |
| COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | Mike Schofield | State Represen | ntative | |
| (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.) | | | | | |
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|---|---|--------------|--------------|--------------|-----------------|-------|---------------------------|
| 12 COMMITTEE NAME | | | | | 13 Filer ID |) (E | Ethics Commission Filers) |
| Houston Pilots PAC | | | | | 00088 | 813 | |
| 14 COMMITTEE ACTIVITY (Attach lists on plain | Candidates (Identify by name or, if applicable, classify by party.) | | Lauren Ashle | y Simmons | State Represent | ative | |
| paper to complete this report if necessary.) | | | | | | | |
| | 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.) | | | | | | |
| COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | Valoree Swa | nson State F | Representative | | |
| (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.) | | Cody Vasut | State Repres | sentative | | |
| (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.) | | | | | | |
| | Assisted | | | | | | |

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|--|---|--------------|-------------|-------------------|-------------|----------------------------|
| 12 COMMITTEE NAME | | | | | 13 Filer ID | (Ethics Commission Filers) |
| Houston Pilots PAC | | | | | 00088813 | i |
| 14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this | Candidates (Identify by name or, if applicable, classify by party.) | | Armando Wa | lle State Represe | entative | |
| report if necessary.) | Measures (Describe by date and location of election and | A. Supported | | | | |
| | nature of issue.) | B. Opposed | | | | |
| | Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | | |
| COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | | Gene Wu St | ate Representativ | e | |
| (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.) | | Dade Phelan | State Represent | ative | |
| (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.) | | | | | |
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| | | | | | | | ADDENDUM |
|---|--|-------------|--------------|-----------------|----------|------------|----------------------------|
| | | | | | | | Page 13 of 47 |
| 12 COMMITTEE NAME | | | | | 1 | 3 Filer ID | (Ethics Commission Filers) |
| Houston Pilots PAC | | | | | | 00088813 | |
| 14 COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | ed Dan Patri | ck Lieutenant (| Governor | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | I | | | | |
| | Measures (Describe by date and location of election and nature of issue.) | A. Supporte | ed | | | | |
| | | B. Opposed | I | | | | |
| | 3. Officeholders Assisted | | | | | | |
| | (Identify by name or, if applicable, classify by party.) | | | | | | |
| COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | ed Edward Po | ollard Houston | City Cou | ncil | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | I | | | | |
| | 2. Measures | A. Supporte | ed | | | | |
| | (Describe by date and location of election and nature of issue.) | | | | | | |
| | | B. Opposed | I | | | | |
| | Officeholders Assisted (Identify by name or, if | | | | | | |
| | applicable, classify by party.) | | | | | | |
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SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

| | | 14 (| of 47 |
|--|------------------|-------------------------|--------|
| 7 COMMITTEE NAME | 18 Filer ID | (Ethics Commission File | ers) |
| Houston Pilots PAC | 00088813 | | |
| 9 SCHEDULE SUBTOTALS NAME OF SCHEDULE | • | SUBTOTAL AMOL | JNT |
| 1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ 15, | 900.00 |
| 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | 0.00 |
| 3. X SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ | 0.00 |
| 4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR ORGANIZATION | LABOR | \$ | |
| 5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM COR LABOR ORGANIZATION | PORATION OR | \$ | |
| 6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR | ORGANIZATION | \$ | |
| 7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LA ORGANIZATION | ABOR | \$ | |
| 8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LAI | BOR ORGANIZATION | \$ | |
| 9. X SCHEDULE E: LOANS | | \$ | 0.00 |
| 10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBU | TIONS | \$ 48, | 002.00 |
| 11. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | 0.00 |
| 12. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRI | BUTIONS | \$ | 0.00 |
| 13. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | 0.00 |
| 14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRI | BUTIONS | \$ | |
| 15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION TO FILER | ONS RETURNED | \$ | |

| | MONET | ARY POLITICAL CONTRIBUTION | | SCHEDULE A1 | | | |
|---|-------------------------------|---|-----|---|---|--|-----------|
| | The Instruc | ction Guide explains how to complete this fo | orı | m. | 1 | Total pages Schedule A1: Sch: 1/19 Rpt: 15/47 | |
| 2 | FILER NAME Houston Pilo | its PAC | | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) |
| 4 | Date 11/06/2024 | Full name of contributor | |) | 7 | Amount of Contribution (\$) | \$200.00 |
| 8 | Principal occu | League City, TX 77573-7183 pation / Job title (See Instructions) | 9 | Employer (See Instructions Self-Employed | - s) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_ Arbogast, Sean P. Contributor address; City; State; Zip Code League City, TX 77573-4699 | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | <u> </u> | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_ Barton, Kent D. Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | Friendswood, TX 77546-8407 pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | s) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_ Bass, Brandon Contributor address; City; State; Zip Code Houston, TX 77007-3728 | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | <u> </u> | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_ Benecke, Justin Contributor address; City; State; Zip Code Houston, TX 77079-5939 | | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | s) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | | SCHEDULE A1 | | | |
|---|-------------------------------|--|----|---|----------------|--|-----------|
| | The Instruc | ction Guide explains how to complete this f | or | m. | 1 | Total pages Schedule A1: Sch: 2/19 Rpt: 16/47 | |
| 2 | FILER NAME Houston Pilo | ts PAC | | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) |
| 4 | Date 11/06/2024 | Full name of contributor | | | 7 | Amount of Contribution (\$) | \$100.00 |
| 8 | Principal occu Ship Channe | League City, TX 77573-5616 pation / Job title (See Instructions) | 9 | Employer (See Instructions HOUSTON PILOTS | <u> </u> s) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_Beyl, Lucas Contributor address; City; State; Zip Code Richmond, TX 77406-7684 | | | - | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Pilot | pation / Job title (See Instructions) | | Employer (See Instructions Self-Employed | <u>I</u> S) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_Blomquist, John C. Contributor address; City; State; Zip Code Taylor Lake Village, TX 77586-4720 | |) | • | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | <u> </u> s) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_Bratcher, John M. Contributor address; City; State; Zip Code Houston, TX 77057-1501 | | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_Briones, Jason Contributor address; City; State; Zip Code Deer Park, TX 77536-4683 | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | | SCHEDULE A1 | | | |
|---|-------------------------------|--|-----|---|----------------|--|-----------|
| | The Instruc | ction Guide explains how to complete this | for | m. | 1 | Total pages Schedule A1: Sch: 3/19 Rpt: 17/47 | |
| 2 | FILER NAME Houston Pilo | ots PAC | | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) |
| 4 | Date 11/06/2024 | 5 Full name of contributor out-of-state PAC (ID# Brown, Greg J. 6 Contributor address; City; State; Zip Code | |) | 7 | Amount of Contribution (\$) | \$200.00 |
| _ | Deignaignal | Seabrook, TX 77586-4615 | ا م | Franks var (Cas kastrustis va | | | |
| 8 | Ship Channe | pation / Job title (See Instructions) el Pilot | 9 | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | Houston, TX 77092-3604 pation / Job title (See Instructions) | Т | Employer (See Instructions | <u> </u> 5) | | |
| | Ship Channe | | | HOUSTON PILOTS | , | | |
| | Date 11/06/2024 | Full name of contributor | t: |) | | Amount of Contribution (\$) | \$200.00 |
| | Delinational | Hitchcock, TX 77563-1917 | _ | Formula you (O a a la atomatica yo | <u></u> | | |
| | Ship Pilot | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID# Callier, Brett A. Contributor address; City; State; Zip Code Seabrook, TX 77586-2868 | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID# Casas, Ryan Contributor address; City; State; Zip Code Friendswood, TX 77546-1451 | | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Pilot | pation / Job title (See Instructions) | | Employer (See Instructions Self-Employed | s) | | |
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| | MONET | ARY POLITICAL CONTRIBUTI | 10 | NS | | SCHEDUL | E A1 |
|---|-------------------------------|---|-------------|--|----------|--|-------------|
| | The Instruc | ction Guide explains how to complete this | for | ·m. | 1 | Total pages Schedule A1: Sch: 4/19 Rpt: 18/47 | |
| 2 | FILER NAME Houston Pilo | ts PAC | | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) |
| 4 | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID: Charpentier, Jason W. Contributor address; City; State; Zip Code | |) | 7 | Amount of Contribution (\$) | \$150.00 |
| 8 | Principal occu | League City, TX 77573-1762 pation / Job title (See Instructions) | 9 | Employer (See Instructions | s) | | |
| | Ship Channe | | | HOUSTON PILOTS | -, | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID: Childress, Donald C. Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$200.00 |
| | | Galveston, TX 77554-7111 | _ | | <u> </u> | | |
| | Principal occu Pilot | pation / Job title (See Instructions) | | Employer (See Instructions Houston Pilots Associat | | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID# Collins, Darren Contributor address; City; State; Zip Code | #: <u> </u> |) | • | Amount of Contribution (\$) | \$100.00 |
| | Daine die alle a con | Cypress, TX 77433-3594 | _ | Faralana (Osa la structiona | <u></u> | | |
| | Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID: Conway, Justin Contributor address; City; State; Zip Code Houston, TX 77059-3765 | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Pilot | pation / Job title (See Instructions) | | Employer (See Instructions Houston Pilots Associat | | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID# Cook, Sean M. Contributor address; City; State; Zip Code Galveston, TX 77551-5657 | | | • | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Ship Channe | a i not | | 100310N FILO13 | | | |

| | MONET | ARY POLITICAL CONTRIBU | | SCHEDUL | ULE A1 | | |
|---|-------------------------------|---|----------|---|---------------|--|-----------|
| | The Instruc | ction Guide explains how to complete | this for | m. | 1 | Total pages Schedule A1: Sch: 5/19 Rpt: 19/47 | |
| 2 | FILER NAME Houston Pilo | ts PAC | | | 3 | Filer ID (Ethics Commissio 00088813 | n Filers) |
| 4 | Date 11/06/2024 | Full name of contributor out-of-state PAG Cope, Robert Contributor address; City; State; Zip Code | - |) | 7 | Amount of Contribution (\$) | \$50.00 |
| 8 | Principal occur | Houston, TX 77059-3281 pation / Job title (See Instructions) | ام | Employer (See Instructions | ·/ | | |
| _ | Ship Channe | | | HOUSTON PILOTS | •) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAG Covert, Brent Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occur | League City, TX 77573-6458 pation / Job title (See Instructions) | | Employer (See Instructions | :) | | |
| | Ship Channe | | | HOUSTON PILOTS | ', | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAG Creech, Kelly J. Contributor address; City; State; Zip Code | C (ID#: | | | Amount of Contribution (\$) | \$50.00 |
| | | Santa Fe, TX 77510-9040 | | | <u> </u> | | |
| | Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAG Curtiss, Michael A. Contributor address; City; State; Zip Code Houston, TX 77058-4375 | - |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAG Dean, Patrick Contributor address; City; State; Zip Code Galveston, TX 77554-9643 | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | Ν | IS | | SCHEDUL | E A1 |
|---|--------------------------------|---|----|---|--------|--|-------------|
| | The Instruc | ction Guide explains how to complete this f | or | m. | 1 | Total pages Schedule A1: Sch: 6/19 Rpt: 20/47 | |
| 2 | FILER NAME Houston Pilo | ots PAC | | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) |
| 4 | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_Decatur, Matthew Contributor address; City; State; Zip Code | | | 7 | Amount of Contribution (\$) | \$200.00 |
| _ | Deignaignal | Houston, TX 77058-4232 | ١, | Franksian (Cookaranian | | | |
| 8 | Principal occu Pilot | pation / Job title (See Instructions) | 9 | Employer (See Instructions Self-Employed | 5) | | |
| | Date 11/06/2024 | Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | Ship Channe | el Pilot | | HOUSTON PILOTS | | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_Elmore, Shaun Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$100.00 |
| | | Dickinson, TX 77539-6744 | | | | | |
| | Principal occur Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | s) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_Elrod, Brent Contributor address; City; State; Zip Code Houston, TX 77069-1538 | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_English, Bryan Contributor address; City; State; Zip Code Pearland, TX 77581-2741 | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Pilot | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | s) | | |
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| | MONET | ARY POLITICAL CONTRIB | | SCHEDUL | ILE A1 | | |
|---|-------------------------------|--|----------|---|---|--|-----------|
| | The Instruc | ction Guide explains how to complete | this for | m. | 1 | Total pages Schedule A1: Sch: 7/19 Rpt: 21/47 | |
| 2 | FILER NAME Houston Pilo | ts PAC | | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) |
| 4 | Date 11/06/2024 | Full name of contributor | AC (ID#: |) | 7 | Amount of Contribution (\$) | \$200.00 |
| 8 | Principal occu | Cypress, TX 77433-6270 pation / Job title (See Instructions) | la la | Employer (See Instructions | :, | | |
| 0 | Ship Channe | | 9 | HOUSTON PILOTS | ·) | | |
| | Date 11/06/2024 | Full name of contributor | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu | Houston, TX 77062-8070 pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | Ship Channe | | | HOUSTON PILOTS | ,, | | |
| | Date 11/06/2024 | Full name of contributor | AC (ID#: | | | Amount of Contribution (\$) | \$100.00 |
| | Deinsinal assu | Houston, TX 77059-3719 | | Frankrian (Cook lastrustions | <u></u> | | |
| | Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | ») | | |
| | Date 11/06/2024 | Full name of contributor out-of-state Paginsberg, Sheldon J. Contributor address; City; State; Zip Code Galveston, TX 77554-2912 | - |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | <u>l </u> | | |
| | Date 11/06/2024 | Full name of contributor out-of-state Pa Glass, Matthew Contributor address; City; State; Zip Code The Woodlands, TX 77375-0191 | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
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| | MONEI | ARY POLITICAL CONTRIBU | JIION | NS | | SCHEDUL | E A1 |
|---|-------------------------------|--|----------|---|----------------|--|-------------|
| | The Instru | ction Guide explains how to complete t | this for | m. | 1 | Total pages Schedule A1: Sch: 8/19 Rpt: 22/47 | |
| 2 | FILER NAME Houston Pilo | ots PAC | | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) |
| 4 | Date 11/06/2024 | 6 Contributor address; City; State; Zip Code | C (ID#: | | 7 | Amount of Contribution (\$) | \$200.00 |
| 8 | Principal occu Pilot | League City, TX 77573-7414 pation / Job title (See Instructions) | 9 | Employer (See Instructions Houston Pilots Associat | | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC Gould, Christopher Contributor address; City; State; Zip Code | C (ID#: | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | Seabrook, TX 77586-1517 pation / Job title (See Instructions) el Pilot | | Employer (See Instructions Houston Pilots Associat | | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC Guice, Adam W. Contributor address; City; State; Zip Code | C (ID#: |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | Houston, TX 77025-3921 pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | <u> </u> s) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC Harris, Stephen Contributor address; City; State; Zip Code Pearland, TX 77584-8701 | C (ID#: | | | Amount of Contribution (\$) | \$150.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | <u>I</u> S) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC Hatami, Ramin Contributor address; City; State; Zip Code League City, TX 77573-6453 | C (ID#: | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | s) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | N | IS | | SCHEDULI | E A1 |
|---|-------------------------------|--|-----|---|---|--|-------------|
| | The Instruc | ction Guide explains how to complete this f | orı | m. | 1 | Total pages Schedule A1: Sch: 9/19 Rpt: 23/47 | |
| 2 | FILER NAME Houston Pilo | ots PAC | | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) |
| 4 | Date 11/06/2024 | Full name of contributor | |) | 7 | Amount of Contribution (\$) | \$200.00 |
| 8 | | Kingwood, TX 77339-3412 pation / Job title (See Instructions) | 9 | Employer (See Instructions |) s) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_Hill, Stephen M. Contributor address; City; State; Zip Code San Leon, TX 77539-2866 | | Self-Employed | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | <u>l</u> 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_ Jefferson, Darris Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Pilot | Houston, TX 77085-3206 pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | <u> </u> 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_ Jewell, Stephen Contributor address; City; State; Zip Code Santa Fe, TX 77510-1231 | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | <u> </u> | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_ Jones, Sr., Kenneth Contributor address; City; State; Zip Code Seabrook, TX 77586-4514 | |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | s) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | | SCHEDULE A1 | | | |
|---|-------------------------------|---|----|---|----------------|---|-----------|
| | The Instruc | ction Guide explains how to complete this f | or | m. | 1 | Total pages Schedule A1: Sch: 10/19 Rpt: 24/47 | |
| 2 | FILER NAME Houston Pilo | ots PAC | | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) |
| 4 | Date 11/06/2024 | 5 Full name of contributor out-of-state PAC (ID#:_Keith, Kevin 6 Contributor address; City; State; Zip Code | |) | 7 | Amount of Contribution (\$) | \$200.00 |
| 8 | Principal occu Ship Channe | Spring, TX 77386-3175 pation / Job title (See Instructions) | 9 | Employer (See Instructions HOUSTON PILOTS | <u> </u> s) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_Kelly, Douglas Contributor address; City; State; Zip Code Galveston, TX 77554-8041 | |) | - | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | Pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | <u> </u> s) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_ Kern, William Contributor address; City; State; Zip Code | |) | • | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | League City, TX 77573-7790 pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | <u> </u> s) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_King, Donald C. Contributor address; City; State; Zip Code Houston, TX 77057-1444 | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | <u>l</u> S) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#:_Kirk, Kevin Contributor address; City; State; Zip Code Friendswood, TX 77546-1533 | | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Pilot | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | s) | | |
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| | MONET | ARY POLITICAL CONTRIBUTI | 10 | NS | | SCHEDUL | E A1 |
|---|-------------------------------|--|-----|---|--------|---|-------------|
| | The Instruc | ction Guide explains how to complete this | for | rm. | 1 | Total pages Schedule A1: Sch: 11/19 Rpt: 25/47 | |
| 2 | FILER NAME Houston Pilo | ts PAC | | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) |
| 4 | Date 11/06/2024 | Full name of contributor | |) | 7 | Amount of Contribution (\$) | \$200.00 |
| 8 | Principal occu | League City, TX 77573-7091 pation / Job title (See Instructions) | 9 | Employer (See Instructions | s) | | |
| | Ship Channe | el Pilot | | HOUSTON PILOTS | | | |
| | Date 11/06/2024 | Full name of contributor | #: | | | Amount of Contribution (\$) | \$200.00 |
| | | Houston, TX 77024-4008 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | s) | | |
| | Ship Channe | el Pilot | | HOUSTON PILOTS | | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID: Lisante, Thomas Contributor address; City; State; Zip Code | #: |) | | Amount of Contribution (\$) | \$100.00 |
| | | Clear Lake Shores, TX 77565-2525 | | | | | |
| | Principal occu Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | s) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID: Locke, Jeffrey B. Contributor address; City; State; Zip Code Houston, TX 77059-3111 | |) | • | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID: Loeffler IV, Frank J. Contributor address; City; State; Zip Code Dickinson, TX 77539-6520 | | | • | Amount of Contribution (\$) | \$200.00 |
| | • | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Ship Channe | el Pilot | | HOUSTON PILOTS | | | |
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| MONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | | | |
|----------------------------------|---|---|-------------|---|---|-----------------------------|----------|
| | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 12/19 Rpt: 26/47 | | |
| 2 | FILER NAME Houston Pilo | FILER NAME Houston Pilots PAC | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) | |
| 4 | Date 11/06/2024 | Full name of contributor | |) | 7 | Amount of Contribution (\$) | \$200.00 |
| 8 | Principal occu | Galveston, TX 77551-4630 pation / Job title (See Instructions) | 9 | Employer (See Instructions | | | |
| | Pilot | , , | | HOUSTON PILOTS | , | | |
| | Date 11/06/2024 | | | | Amount of Contribution (\$) | \$100.00 | |
| | | League City, TX 77573-7191 | _ | | <u> </u> | | |
| | Principal occupation / Job title (See Instructions) Ship Channel Pilot HOUSTON PILOTS | | | 5) | | | |
| | Date | Full name of contributor out-of-state PAC (ID# | <u> </u> | 110031011112013 | Π | Amount of Contribution (\$) | |
| | 11/06/2024 | Maher, Marcus A. Contributor address; City; State; Zip Code | | | | `, | \$200.00 |
| | Dringing con | La Porte, TX 77571-7045 | _ | Employer (See Instructions | <u></u> | | |
| | Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID# Malhotra, Rohit Contributor address; City; State; Zip Code Sugar Land, TX 77479-3959 | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID# Manthey, Ian Contributor address; City; State; Zip Code Baytown, TX 77523-2203 | | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Pilot | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | | | | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDUL | SCHEDULE A1 | | |
|----------------------------------|---|--|----------------|---|---|-----------------------------|----------|
| | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 13/19 Rpt: 27/47 | | |
| 2 | FILER NAME Houston Pilo | FILER NAME Houston Pilots PAC | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) | |
| 4 | Date 11/06/2024 | 5 Full name of contributor | | 7 | Amount of Contribution (\$) | \$200.00 | |
| 8 | Principal occu | Houston, TX 77089-2260 pation / Job title (See Instructions) | ١٥ | Employer (See Instructions | ·/ | | |
| • | Ship Channe | | 9 | HOUSTON PILOTS | ») | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 11/06/2024 Martinez Jr., Gilberto B. Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$200.00 | | |
| | Principal occu | Houston, TX 77096-2720 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> 3) | | |
| | Ship Channel Pilot HOUSTON PILOTS | | , | | | | |
| | Date 11/06/2024 | Full name of contributor out-of-s McGee, Jonathon Contributor address; City; State; Zip Co | tate PAC (ID#: |) | | Amount of Contribution (\$) | \$50.00 |
| | Deinsinal assu | Seabrook, TX 77586-2902 | 1 | Franks var (Caa kastu atiana | <u></u> | | |
| | Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Miller, Bradley G. | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-s Moraski, Nicholas Contributor address; City; State; Zip Co | tate PAC (ID#: |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Strip Chariffe | a i not | | TIOUSTON FILOTS | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDUL | E A1 | | |
|----------------------------------|--|---|-----|---|---|--------------------------------------|-----------|
| | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 14/19 Rpt: 28/47 | | |
| 2 | FILER NAME Houston Pilo | ts PAC | | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) |
| 4 | Date 11/06/2024 | 5 Full name of contributor out-of-state PAC (ID#:) 7 | | 7 | Amount of Contribution (\$) | \$200.00 | |
| 8 | Principal occu | Friendswood, TX 77546-4601 pation / Job title (See Instructions) | 9 | Employer (See Instructions | <u> </u> s) | | |
| | Ship Channe | el Pilot | | HOUSTON PILOTS | | | |
| | Date 11/06/2024 | | | • | Amount of Contribution (\$) | \$200.00 | |
| | | Dickinson, TX 77539-8403 | | | | | |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | 5) | | | |
| | Ship Channel Pilot HOUSTON PILOTS | | | | | | |
| | Date 11/06/2024 | Full name of contributor | D#: |) | | Amount of Contribution (\$) | \$200.00 |
| | | Clear Lake Shores, TX 77565-2454 | | | | | |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID Newingham, Michael J. Contributor address; City; State; Zip Code Conroe, TX 77385-8113 | |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID Newkirk, Craig P. Contributor address; City; State; Zip Code Friendswood, TX 77546-4621 | | | • | Amount of Contribution (\$) | \$200.00 |
| | · | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Ship Channe | el Pilot | | HOUSTON PILOTS | | | |
| | | | | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDUL | LE A1 | | |
|----------------------------------|--|--|----|---|---|-----------------------------|----------|
| | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 15/19 Rpt: 29/47 | | |
| 2 | FILER NAME Houston Pilots PAC | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) | | |
| 4 | Date 11/06/2024 | te 5 Full name of contributor out-of-state PAC (ID#:) 7 | | 7 | Amount of Contribution (\$) | \$200.00 | |
| 8 | Principal occu | Friendswood, TX 77546-1531 pation / Job title (See Instructions) | 9 | Employer (See Instructions | s) | | |
| | Ship Channe | | | HOUSTON PILOTS | , | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 11/06/2024 Parker, Travis Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$200.00 | | |
| | | League City, TX 77573-6903 | _ | | L | | |
| | Principal occupation / Job title (See Instructions) Ship Channel Pilot HOUSTON PILOTS | | 5) | | | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID# Peace, Mark A. Contributor address; City; State; Zip Code Deer Park, TX 77536-3971 | : |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | Ship Channe | el Pilot | | HOUSTON PILOTS | | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID# Phillips, Justin Contributor address; City; State; Zip Code Washington, DC 20003-1107 | |) | • | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID# Prejean, Chad M. Contributor address; City; State; Zip Code Pearland, TX 77584-3619 | | | • | Amount of Contribution (\$) | \$200.00 |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Ship Channe | el Pilot | | HOUSTON PILOTS | | | |
| | | | | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | | E A1 | | | |
|----------------------------------|---|--|---------|---|---|-----------------------------|----------|
| | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 16/19 Rpt: 30/47 | | |
| 2 | FILER NAME Houston Pilo | FILER NAME Houston Pilots PAC | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) | |
| 4 | Date 11/06/2024 | 5 Full name of contributor | | 7 | Amount of Contribution (\$) | \$200.00 | |
| 8 | Principal occu Ship Channe | Splendora, TX 77372-5265 pation / Job title (See Instructions) | 9 | Employer (See Instructions HOUSTON PILOTS | i) | | |
| | Date 11/06/2024 | | | | Amount of Contribution (\$) | \$200.00 | |
| | Principal occupation / Job title (See Instructions) Pilot Employer (See Instructions) HOUSTON PILOTS | | | <u> </u> | | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAG Reeder, David C. Contributor address; City; State; Zip Code | C (ID#: |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | Houston, TX 77062-4758 pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | <u> </u> ;) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 11/06/2024 Riggle, Michael T. Contributor address; City; State; Zip Code El Lago, TX 77586-5924 | | | Amount of Contribution (\$) | \$200.00 | | |
| | Principal occu Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 11/06/2024 Roberts, Scott E. Contributor address; City; State; Zip Code Friendswood, TX 77546-1728 | | | Amount of Contribution (\$) | \$200.00 | | |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | | | • | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | | | |
|----------------------------------|---|--|--------------|---|---|--------------------------------------|-----------|
| | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 17/19 Rpt: 31/47 | | |
| 2 | FILER NAME Houston Pilo | its PAC | | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) |
| 4 | Date 11/06/2024 | tte 5 Full name of contributor out-of-state PAC (ID#:) 7 | | 7 | Amount of Contribution (\$) | \$50.00 | |
| 8 | Principal occu Ship Channe | | 9 | Employer (See Instructions HOUSTON PILOTS |) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 11/06/2024 Saba, Brian Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$200.00 | | |
| | Principal occu Pilot | Seabrook, TX 77586-2903 pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS |) | | |
| | Date 11/06/2024 | Schuessler, Chase Contributor address; City; State; Zip Code | te PAC (ID#: | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Ship Channe | Seabrook, TX 77586-4706 pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS |) | | |
| | Date 11/06/2024 | | te PAC (ID#: | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS |) | | |
| | Date 11/06/2024 | Full name of contributor out-of-sta Shuptar, Adam Contributor address; City; State; Zip Code Friendswood, TX 77546-2546 | te PAC (ID#: | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Pilot | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS |) | | |
| | | | | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | | SCHEDUL | E A1 | | |
|----------------------------------|--|--|---|---|---|--------------------------------------|-----------|
| | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 18/19 Rpt: 32/47 | | |
| 2 | FILER NAME Houston Pilo | its PAC | | | 3 | Filer ID (Ethics Commission 00088813 | n Filers) |
| 4 | Date 11/06/2024 | te 5 Full name of contributor out-of-state PAC (ID#:) 7 | | 7 | Amount of Contribution (\$) | \$200.00 | |
| 8 | Principal occu | Galveston, TX 77550-6849 pation / Job title (See Instructions) | 9 | Employer (See Instructions | - s) | | |
| | Ship Channe | el Pilot | | HOUSTON PILOTS | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 11/06/2024 Taylor, Kristi Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$200.00 | | |
| | | League City, TX 77573-1587 | _ | | | | |
| | Principal occupation / Job title (See Instructions) Ship Channel Pilot HOUSTON PILOTS | | | s) | | | |
| | | | _ | | | | |
| | Date 11/06/2024 | Full name of contributor | | | | Amount of Contribution (\$) | \$150.00 |
| | | Houston, TX 77079 | | | | | |
| | Principal occu Ship Channe | pation / Job title (See Instructions) el Pilot | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#: Vassar, John Contributor address; City; State; Zip Code Houston, TX 77079-7208 | | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Ship Channe | pation / Job title (See Instructions) | | Employer (See Instructions HOUSTON PILOTS | 5) | | |
| | Date 11/06/2024 | Full name of contributor out-of-state PAC (ID#: Walcik, Jeremiah Contributor address; City; State; Zip Code Houston, TX 77018-3240 | | | | Amount of Contribution (\$) | \$200.00 |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Ship Channe | el Pilot | | HOUSTON PILOTS | | | |
| | | | | | | | |

| The Instruction Guide explains how to complete this Form. 1 Total pages Schedule A1: Sch: 19/19 Rpt: 33/47 | |
|--|---|
| Houston Pilots PAC 4 Date 11/06/2024 5 Full name of contributor out-of-state PAC (ID#: | |
| 11/06/2024 Winegar, Clint A. 6 Contributor address; City; State; Zip Code League City, TX 77573-7284 8 Principal occupation / Job title (See Instructions) Ship Channel Pilot 9 Employer (See Instructions) HOUSTON PILOTS Date 11/06/2024 Young, Clinton out-of-state PAC (ID#:) Amount of Contribution (\$) Contributor address; City; State; Zip Code League City, TX 77573-1205 Principal occupation / Job title (See Instructions) Employer (See Instructions) | 2 |
| 8 Principal occupation / Job title (See Instructions) Ship Channel Pilot Date 11/06/2024 Young, Clinton Contributor address; City; State; Zip Code League City, TX 77573-1205 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$\$ \$\$ Employer (See Instructions) Employer (See Instructions) | 4 |
| Ship Channel Pilot Date 11/06/2024 Young, Clinton Contributor address; City; State; Zip Code League City, TX 77573-1205 Principal occupation / Job title (See Instructions) HOUSTON PILOTS Amount of Contribution (\$) \$\frac{\\$ \\$ \}{\} \} Employer (See Instructions) | 8 |
| 11/06/2024 Young, Clinton Contributor address; City; State; Zip Code League City, TX 77573-1205 Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | |
| | |
| | |
| | |

| PLE | DGED CONTRIBU | TIONS | | | | SCHEDULE B |
|-----------------------|------------------------------------|------------------------|-------------------------|------|-----------------------|--|
| т | he Instruction Guide exp | plains how to comple | ete this form. | 1 | Total pages Scho | |
| 2 FILER N. Houston | AME n Pilots PAC | | | 3 | Filer ID (E | thics Commission Filers) |
| 4 TOTAL | OF UNITEMIZED PLED | GES | | | \$ | 0.00 |
| 5 Date | 6 Full name of pledgor | out-of-state PAC (ID#: |) | 8 | Amount of pledge (\$) | 9 In-kind description (If applicable) |
| | 7 Pledgor Address; | City; State; Zip Code | | | | |
| | | | |][| Check if travel ou | tside of Texas. Complete Schedule T |
| 10 Principal | occupation / Job title (See Instru | uctions) | 11 Employer (See Instru | ucti | ons) | |
| | | | | | | |
| | | | | | | |

| LOANS | | | | SCHEDUL | ΕE |
|--|----------------------|-------------------------------|-------------------|---|---------|
| The Instruction Guide explains ho | w to complete this f | orm. | l | ges Schedule E: 1 Rpt: 35/47 | |
| 2 FILER NAME Houston Pilots PAC | | | 3 Filer ID 000888 | (Ethics Commission F | Filers) |
| 4 TOTAL OF UNITEMIZED LOANS | | | | \$ | 0.00 |
| 5 Date of loan 7 Name of lender | out-of-state PA | C (ID#: |) | 9 Loan Amount (\$) | |
| 6 Is lender a financial institution? | City; State; | Zip Code | | 10 Interest Rate | |
| | | | | 11 Maturity Date | |
| 12 Principal occupation / Job title (See Instruction | ns) | 13 Employer (See Instructions | 5) | | |
| 14 Description of Collateral None | | 15 Check if personal funds we | ere deposited | d into political account (See Instructions) | |
| 16 GUARANTOR INFORMATION 17 Name of guarantor | | | | 19 Amount Guarantee | ed (\$) |
| not applicable 18 Guarantor address; | City; State; | Zip Code | | | |
| | | | | | |
| 20 Principal occupation | | 21 Employer (See Instructions | s) | ı | |
| | | | | | |

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

| Candidate/Officeholder/Politica Credit Card Payment | I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) |
|---|--|
| orealt out a rayment | The Instruction Guide explains how to complete this form. |
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 1/12 Rpt: 36/47 | Houston Pilots PAC 00088813 |
| 4 Date | 5 Payee name |
| 10/29/2024 | A.J. Louderback Campaign |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$500.00 | PO Box 1792 |
| | |
| Expenditure from corporate funds | Victoria, TX 77902-1792 |
| 8 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 Check if Austin, TX, officeholder living expense |
| | Contribution to committee |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 1 |
| Date | Payee name |
| 10/29/2024 | Armando Walle Campaign |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,000.00 | 4826 Hollybrook Lane |
| | |
| Expenditure from corporate funds | Houston, TX 77039-3713 |
| 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 |
| | Contribution to committee |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 10/29/2024 | Borris Miles Campaign |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$4,000.00 | 5302 Almeda Road |
| | |
| Expenditure from corporate funds | Houston, TX 77004-7440 |
| 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 |
| | Contribution to committee |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experiorare to benefit C/OI | 1 |
| | |
| | |
| i | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Commit

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 2/12 Rpt: 37/47 | Houston Pilots PAC 00088813 |
| 4 Date | 5 Payee name |
| 10/29/2024 | Brent Hagenbuch Campaign |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$2,500.00 | 2800 Shoreline Drive |
| | |
| Expenditure from corporate funds | Denton, TX 76210-0124 |
| | |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| | Candidate/Officeholder/Political Committee |
| | Contribution to committee |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 10/31/2024 | Cadence Bank |
| Amount (\$) | Payee address; City; State; Zip Code |
| ` ' | |
| \$2.00 | 1333 West Loop S |
| Expenditure from | Ste 1800 |
| corporate funds | Houston, TX 77027-9138 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | Bank fee |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Date | Payee name |
| 10/29/2024 | Carol Alvarado Campaign |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,500.00 | P.O. Box 230842 |
| Ψ1,500.00 | 1.0. Box 230042 |
| Expenditure from | |
| corporate funds | Houston, TX 77223-0842 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Contributions/Donations Made By |
| EXPENDITURE | Candidate/Officeholder/Political Committee |
| | Contribution to committee |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
| | |
| | |
| | |

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

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | |
| Sch: 3/12 Rpt: 38/47 | Houston Pilots PAC 00088813 |
| • | l. |
| 4 Date | 5 Payee name |
| 10/29/2024 | Caroline Harris Davila Campaign |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,000.00 | PO Box 700 |
| | |
| Expenditure from | Round Rock, TX 78680-0700 |
| corporate funds | <u>,</u> |
| 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 |
| | Contribution to committee |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 1 |
| Date | Payee name |
| 10/29/2024 | Charlene Johnson Campaign |
| Amount (\$) | Payee address; City; State; Zip Code |
| ` ' | PO Box 925775 |
| \$500.00 | PO BOX 925775 |
| Expenditure from | |
| corporate funds | Houston, TX 77292-5775 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Contributions/Donations Made By |
| EXPENDITURE | Candidate/Officeholder/Political Committee |
| | Contribution to committee |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 1 |
| Date | Payee name |
| 10/29/2024 | Charles Cunningham Campaign |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$500.00 | PO Box 14352 |
| Evponditure from | |
| Expenditure from corporate funds | Humble, TX 77347-4352 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense |
| | Contribution to committee |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
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SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

| Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|---|---|
| 1 Total pages Schedule F1: | |
| Sch: 4/12 Rpt: 39/47 | Houston Pilots PAC 00088813 |
| 4 Date | 5 Payee name |
| 10/29/2024 | Charles Perry for State Senate |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$2,500.00 | P.O. Box 94806 |
| Expenditure from corporate funds | Lubbock, TX 79493-4806 |
| 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 |
| | Candidate/Officeholder/Political Committee |
| | |
| Complete ONLY if direct expenditure to benefit C/Oh | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 10/29/2024 | Claudia Ordaz Campaign |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,000.00 | PO Box 71738 |
| - Cynonditure from | |
| Expenditure from corporate funds | El Paso, TX 79917-1738 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Contributions/Donations Made By |
| | Candidate/Officeholder/Political Committee |
| | 33.11.134.13.11.13 |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 10/29/2024 | Cody Vasut Campaign |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,000.00 | P.O. Box 2724 |
| Expenditure from | Angleton TV 77510 0704 |
| corporate funds | Angleton, TX 77516-2724 |
| 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 |
| | Contribution to committee |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
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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 (enter a category not listed above)

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 5/12 Rpt: 40/47 | Houston Pilots PAC 00088813 |
| 4 Date | 5 Payee name |
| 10/29/2024 | Dustin Burrows Campaign |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,000.00 | PO Box 2569 |
| Expenditure from | |
| corporate funds | Lubbock, TX 79408-2569 |
| 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 |
| | Contribution to continutee |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol | |
| Date | Payee name |
| 10/29/2024 | Erin Gamez Campaign |
| Amount (\$) | Payee address; City; State; Zip Code |
| ` ' | |
| \$1,000.00 | 777 E. Harrison |
| Expenditure from | D |
| corporate funds | Brownsville, TX 78520-7118 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| 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 |
| | Contribution to committee |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Date | Device same |
| 10/29/2024 | Payee name Gene Wu Campaign |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$500.00 | P.O. Box 742422 |
| Expenditure from | |
| corporate funds | Houston, TX 77274-2422 |
| 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. |
| - | Candidate/Officeholder/Political Committee |
| | Continuation to continuate |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
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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

| Candidate/Officeholder/Politica Credit Card Payment | Il 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: 6/12 Rpt: 41/47 | Houston Pilots PAC 00088813 |
| 4 Date | 5 Payee name |
| 10/29/2024 | Harold V. Dutton Jr. Campaign |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$500.00 | 3303 Main Street, Suite 303 |
| Expenditure from | |
| corporate funds | Houston, TX 77002-9321 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| 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 |
| | Contribution to continued |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Date | Payee name |
| 10/29/2024 | Jeff Barry Campaign |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$500.00 | 4418 Broadway Street |
| +000.00 | 1.20 Diodainay Caroot |
| Expenditure from corporate funds | Pearland, TX 77581-4018 |
| 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. |
| | Candidate/Officeholder/Political Committee |
| | Contribution to committee |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Date | Payee name |
| 10/29/2024 | Joan Huffman Campaign |
| | · - |
| Amount (\$) | Payee address; City; State; Zip Code PO Box 41964 |
| \$1,500.00 | PO BOX 41904 |
| Expenditure from corporate funds | Houston, TX 77241-1964 |
| 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 |
| | Contribution to committee |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 7/12 Rpt: 42/47 | Houston Pilots PAC 00088813 |
| 4 Date | 5 Payee name |
| 10/29/2024 | Joe Moody Campaign |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,000.00 | PO Box 920827 |
| | |
| Expenditure from corporate funds | El Paso, TX 79902-0015 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense |
| | Contribution to committee |
| | |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 10/29/2024 | Juan Chuy Hinojosa for Senate Campaign |
| Amount (\$) | Payee address; City; State; Zip Code |
| ` ' | 612 W. Nolana Ste 410 |
| \$2,500.00 | 612 W. Nolalia Ste 410 |
| Expenditure from corporate funds | McAllen, TX 78504-3089 |
| 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 |
| | Contribution to committee |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 10/29/2024 | Lauren Ashley Simmons Campaign |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$500.00 | PO Box 56386 |
| 4000.00 | |
| Expenditure from corporate funds | Wahkon, MN 56386 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Contributions/Donations Made By |
| D. LIBITORE | Candidate/Officeholder/Political Committee |
| | Contribution to committee |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experiorare to benefit C/OI | |
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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
Legal 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
OTHER (outpers extrapply not listed above)

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|---|
| 1 Total pages Schedule F1: | |
| Sch: 8/12 Rpt: 43/47 | Houston Pilots PAC 00088813 |
| 4 Date | 5 Payee name |
| 10/29/2024 | Lois Kolkhorst Campaign |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$2,500.00 | PO Box 2546 |
| | |
| Expenditure from corporate funds | Brenham, TX 77834-2546 |
| 8 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 |
| | Contribution to committee |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 1 |
| Date | Payee name |
| 10/29/2024 | Mano DeAyala for State Representative |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$500.00 | 12335 Kingsride Lane #416 |
| | |
| Expenditure from corporate funds | Houston, TX 77024-4116 |
| 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. |
| | Candidate/Officeholder/Political Committee |
| | Contribution to continutee |
| Organists ONII Wife discret | Our stide to 100% as health as a sure |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 10/29/2024 | Mayes Middleton Campaign |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$2,500.00 | PO Box 300 |
| · | |
| Expenditure from corporate funds | Wallisville, TX 77597-0300 |
| 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. |
| | Candidate/Officeholder/Political Committee |
| | Contribution to committee |
| Commission ONUV Editor | Condidate/Officeholder name |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District
OTHER (enter a category not listed above)

| Credit Card Payment | The Instruction Guide explains how to complete this form. | |
|---|---|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) | _ |
| Sch: 10/12 Rpt: 45/47 | Houston Pilots PAC 00088813 | |
| 4 Date | 5 Payee name | |
| 10/29/2024 | Sam Harless Campaign | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code | _ |
| \$500.00 | 15814 Champion Forest PMB 312 | |
| | | |
| Expenditure from corporate funds | Spring, TX 77379-7141 | |
| 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 | |
| | Contribution to committee | |
| O Committee ONII Wife discout | On all data (Office helder marre | _ |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held H | |
| Date | Payee name | = |
| 10/29/2024 | Terry Canales Campaign | |
| Amount (\$) | Payee address; City; State; Zip Code | _ |
| \$2,500.00 | 2727 W. University | |
| Ψ2,300.00 | 2727 W. Offiversity | |
| Expenditure from | | |
| corporate funds | Edinburg, TX 78539-7889 | |
| 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. | |
| | Candidate/Officeholder/Political Committee | |
| | Continuation to committee | |
| Commission ONII V if dispost | Candidate/Officeholder name Office sought Office held | _ |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | | |
| ' | | _ |
| Date | Payee name | |
| 10/29/2024 | Texans for Dade Phelan | |
| Amount (\$) | Payee address; City; State; Zip Code | |
| \$2,500.00 | P.O. Box 5900 | |
| | | |
| Expenditure from corporate funds | Austin, TX 78763-5900 | |
| 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 | |
| | Contribution to committee | |
| | | _ |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held | |
| experiorare to benefit C/Of | | |
| | | _ |

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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

| 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: 11/12 Rpt: 46/47 | Houston Pilots PAC 00088813 |
| 4 Date | 5 Payee name |
| 10/29/2024 | Texans for Dade Phelan |
| 6 Amount (\$) \$2,500.00 | 7 Payee address; City; State; Zip Code P.O. Box 5900 |
| Expenditure from corporate funds | Austin, TX 78763-5900 |
| 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 Contribution to committee |
| | Contribution to committee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 11/11/2024 | Texans for Dan Patrick |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$5,000.00 | PO Box 685085 |
| Expenditure from corporate funds | Austin, TX 78768-5085 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description Contributions/Donations Made Ry Check if travel outside of Texas. Complete Schedule T. |
| 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 |
| | Contribution to committee |
| | |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 10/29/2024 | Todd Hunter Campaign |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,000.00 | 445 Cape Henry |
| Expenditure from corporate funds | Corpus Christi, TX 78412-2633 |
| 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 |
| | Cantribution to committee Cantribution to committee |
| | |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
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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 (outpers extrapply not listed above)

| Candidate/Officeholder/Politica Credit Card Payment | I 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: 12/12 Rpt: 47/47 | Houston Pilots PAC 00088813 |
| 4 Date | 5 Payee name |
| 10/29/2024 | Valoree Swanson for Texas House Camapaign |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$500.00 | 6046 FM 2920 #619 |
| - Evnanditura from | |
| Expenditure from corporate funds | Spring, TX 77379-2542 |
| 8 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/Officeholder/Political Committee |
| | |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 10/29/2024 | Yvonne Davis Campaign |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,000.00 | P.O. Box 763368 |
| Expenditure from corporate funds | Dallas, TX 75376-3368 |
| 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 |
| | Candidate/Officeholder/Political Committee |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
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