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) 00050353 3 COMMITTEE NAME **OFFICE USE ONLY** Houston 80-20 PAC Date Received **ELECTRONICALLY FILED** 12/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 8300 Bender Rd. Change of Address Humble, TX 77396-2309 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Peter NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Hwang CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 8300 Bender Rd. STREET **ADDRESS** (Residence or Business) Humble, TX 77396-2309 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 8300 Bender Rd. MAILING **ADDRESS** Change of Address Humble, TX 77396-2309 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (281) 441-8400 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 10/26/2024 11/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME		12 Filer ID	(Ethics Commission Filers)
L2 COMMITTEE NAME Houston 80-20 PAC		13 Filer ID 00050353	(Ethics Commission Filers)
4 COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by l		US CD 7	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed		
Measures (Describe by date and of election and nature of the control of the			
	B. Opposed		
Officeholders Assisted (Identify by name or, if			
applicable, classify by	· · · · · ·		
TOTALS PLEDGES, LO CONTRIBUTI	EMIZED POLITICAL CONTRIBUTIONS (OTHER THAN OANS, OR GUARANTEES OF LOANS, OR ONS MADE ELECTRONICALLY) is report qualifies for the higher itemization threshold	\$	0.00
2. TOTAL POL	LITICAL CONTRIBUTIONS IN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,500.00
EXPENDITURE 3. TOTAL UNITE TOTALS	EMIZED POLITICAL EXPENDITURES	\$	0.00
4. TOTAL POL	LITICAL EXPENDITURES	\$	7,499.00
	TICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST ORTING PERIOD	DAY \$	111.88
	CIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF F THE REPORTING PERIOD	THE \$	0.00
6 AFFIDAVIT		ı	
	I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
	Mr. Pet	er Hwang	
	Signature of Ca	ımpaign Treası	ırer
AFFIX NOTARY STAMP / SEAL A	BOVE		
Sworn to and subscribed before me, by the	said, t	his the	day
of, 20, to	certify which, witness my hand and seal of office.		
Signature of officer administering oath	Printed name of officer administering oath	Title of offi	cer administering oath

FORM MPAC ADDENDUM

					Page 3 of 14
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Houston 80-20 PAC				00050353	
14 COMMITTEE ACTIVITY (Attach lists on plain	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Al Green US CD	9	
paper to complete this report if necessary.)		В. Орросси			
	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	1. Candidates (Identify by name or, if applicable, classify by party.)		Mrs. sylvester turner US CD 18		
(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.)		The Honorable Molly cook 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			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	applicable, classify by party.)				

FORM MPAC **ADDENDUM**

					Page 4 of 14
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Houston 80-20 PAC				00050353	3
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mrs. kathy cheng 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			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mr. daniel lee State Rep	resentative	
(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.)		The Honorable ron reyno	olds 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.)				
	applicable, classify by party.)				

FORM MPAC **ADDENDUM**

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Houston 80-20 PAC				00050353	3
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable leman la	alani State Representa	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.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable gene w	u State Representative	9
(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.)		The Honorable hubert v	vo State Representativ	ve
(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)				

FORM MPAC **ADDENDUM**

12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Houston 80-20 PAC					0005035	3
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Judge Christine	e weems Suprem	ne Court Justi	ice
(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	1. Candidates (Identify by name or, if applicable, classify by party.)		Mr. Frances bo	ourliot Court Of C	riminal Appea	als, Judge
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. sean teare	District Attorney,	Harris Co.	
(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					

FORM MPAC ADDENDUM

					Page 7 of 14
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Houston 80-20 PAC				00050353	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable andy meyers		
(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.)		The Honorable nabil shike		
(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.)		The Honorable carmen turner	Harris County Ta	ax Assessor
(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.)				
	approache, states, of party,	1			

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3 8 of 14

		8 of 14
	18 Filer ID	(Ethics Commission Filers)
	00050353	
		SUBTOTAL AMOUNT
E A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 7,500.00
E A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBU	TIONS	\$ 0.00
E B: PLEDGED CONTRIBUTIONS		\$ 0.00
	ON OR LABOR	\$
` ,	M CORPORATION OR	\$
E C3: MONETARY SUPPORT FROM CORPORATION OR	LABOR ORGANIZATION	\$
	N OR LABOR	\$
E D: PLEDGED CONTRIBUTIONS FROM CORPORATION	OR LABOR ORGANIZATION	\$
E E: LOANS		\$ 0.00
E F1: POLITICAL EXPENDITURES FROM POLITICAL CON	NTRIBUTIONS	\$ 7,499.00
E F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
E F3: PURCHASE OF INVESTMENTS FROM POLITICAL C	CONTRIBUTIONS	\$ 0.00
E F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00
E I: NON-POLITICAL EXPENDITURES FROM POLITICAL C	CONTRIBUTIONS	\$
E K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONT	RIBUTIONS RETURNED	\$
	LE A1: MONETARY POLITICAL CONTRIBUTIONS LE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS LE B: PLEDGED CONTRIBUTIONS LE C1: MONETARY CONTRIBUTIONS FROM CORPORATION ATION LE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM REGANIZATION LE C3: MONETARY SUPPORT FROM CORPORATION OR LE C4: NON-MONETARY SUPPORT FROM CORPORATION ATION LE D: PLEDGED CONTRIBUTIONS FROM CORPORATION LE E: LOANS LE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS LE F2: UNPAID INCURRED OBLIGATIONS LE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS LE F4: EXPENDITURES MADE BY CREDIT CARD LE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS LE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS, AND CONTRIBUTIONS, AND CONTRIBUTIONS, AND CONTRIBUTIONS	LE A1: MONETARY POLITICAL CONTRIBUTIONS LE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS LE B: PLEDGED CONTRIBUTIONS LE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ATION LE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR REGANIZATION LE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION LE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ATION LE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION LE C5: LOANS LE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS LE F2: UNPAID INCURRED OBLIGATIONS LE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS LE F4: EXPENDITURES MADE BY CREDIT CARD LE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS LE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/3 Rpt: 9/14	
2	FILER NAME Houston 80-			3	Filer ID (Ethics Commission 00050353	n Filers)
4	Date 11/02/2024	 Full name of contributor out-of-state PAC (ID#:) Calvert, Rogene Contributor address; City; State; Zip Code Houston, TX 77025 			Amount of Contribution (\$)	\$500.00
8	Principal occu	Houston, TX 77025 rincipal occupation / Job title (See Instructions) 9 Employer (See Instructions)				
		Political consultant				
	Date 11/02/2024	Full name of contributor			Amount of Contribution (\$)	\$500.00
	Principal occu Lawyer	Employer (See Instructions)			
	Date 11/02/2024	Full name of contributor out-of-state PAC (ID#:_ Durrani, Afaq Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		Katy, TX 77450				
	Principal occu Engineer	pation / Job title (See Instructions)	Employer (See Instructions Self)		
	Date 11/02/2024	Full name of contributor out-of-state PAC (ID#:_Fong, Cecil Contributor address; City; State; Zip Code Houston, TX 77071)		Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/02/2024	Full name of contributor out-of-state PAC (ID#:_ Green, Al (The Honorable) Contributor address; City; State; Zip Code houston, TX 77027)		Amount of Contribution (\$)	\$500.00
	Principal occu US Congres	pation / Job title (See Instructions) sman	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this 1	orm.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 10/14	
2	FILER NAME Houston 80-			3	Filer ID (Ethics Commission 00050353	n Filers)
4	Date 11/02/2024	6 Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
•	Dringing! goog	Humble, TX 77396				
8	manager	pation / Job title (See Instructions)	9 Employer (See Instructions self	5)		
	Date 11/02/2024	Full name of contributor out-of-state PAC (ID#:_Liu, Xin (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Pearland, TX 77584 pation / Job title (See Instructions)	Employer (See Instructions	_		
	IT	pation 7 300 title (See Instructions)	Employer (See Instructions	·)		
	Date 11/02/2024	Full name of contributor out-of-state PAC (ID#:_ Pei, Shin Shem Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Houston, TX 77096				
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions University of Houston	5)		
	Date 11/02/2024	Full name of contributor out-of-state PAC (ID#:_Ray, Chiu-Wen (Mrs.) Contributor address; City; State; Zip Code Woodland, TX 77382			Amount of Contribution (\$)	\$500.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 11/02/2024	Full name of contributor out-of-state PAC (ID#:_Sha, Li (Mrs.) Contributor address; City; State; Zip Code Houston, TX 77024			Amount of Contribution (\$)	\$500.00
	Principal occur restaurant ov	pation / Job title (See Instructions) wner	Employer (See Instructions)		

	MONET	ARY POLITICAL CO		SCHEDUL	SCHEDULE A1		
	The Instruc	ction Guide explains how t	o complete this fo	rm.	1	Total pages Schedule A1: Sch: 3/3 Rpt: 11/14	
2	FILER NAME Houston 80-2	20 PAC			3	Filer ID (Ethics Commission 00050353	n Filers)
4	Date 11/02/2024	5 Full name of contributor Shih, Helen (Mrs.)6 Contributor address; City; Stat	7	Amount of Contribution (\$)	\$500.00		
8	Principal occu	Pearland, TX 77584 pation / Job title (See Instructions)	To	Employer (See Instructions	:) 		
Ŭ	Vision-Mission			Employer (dee mandenone	',		
	Date 11/02/2024	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$500.00
	Principal occu	Houston, TX 77002 pation / Job title (See Instructions)		Employer (See Instructions	·/		
	Self			Outreach	,		
	11/02/2024 lin, chimei		out-of-state PAC (ID#: e; Zip Code)		Amount of Contribution (\$)	\$500.00
		Houston, TX 77036					
	Principal occu manager	pation / Job title (See Instructions)		Employer (See Instructions Chinese Community Ce	•	r	
	Date Full name of contributor out-of-state P. 11/02/2024 turner, sylvester (Mr.)					Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions) eader		Employer (See Instructions	5)		
	Date 11/02/2024	Full name of contributor yang, Dequing (Mr.) Contributor address; City; Stat Houston, TX 77036	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu owner	pation / Job title (See Instructions)		Employer (See Instructions Allwin Insurance	5)		
			<u>'</u>				

PLE	OGED CONTRIBU	TIONS			SCHEDULE B
T	he Instruction Guide exp	plains how to compl	ete this form.	1	Total pages Schedule B: Sch: 1/1 Rpt: 12/14
2 FILER NA	AME 80-20 PAC			3	Filer ID (Ethics Commission Filers) 00050353
4 TOTAL	TOTAL OF UNITEMIZED PLEDGES				\$ 0.0
5 Date	6 Full name of pledgor 7 Pledgor Address;	out-of-state PAC (ID#		8	Amount of pledge (\$)
40 Data da al	The title (Contractor		Taa		Check if travel outside of Texas. Complete Schedul
10 Principai	occupation / Job title (See Instru	ictions)	11 Employer (See Ins	structi	ions)

	LOANS						SCH	EDULE	E
	The Instruction	on Guide explains how	orm.	1		es Schedule E Rpt: 13/14	:		
2	FILER NAME Houston 80-20 F	PAC			1	iler ID 005035	(Ethics Comm	ission Filer	s)
4	TOTAL OF UN	NITEMIZED LOANS					\$		0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:)	9 Loan Amou	ınt (\$)	
6	Is lender a financial institution?	8 Lender address; Ci	ty; State;	Zip Code			10 Interest Ra		
							11 Maturity Da	ate	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instruction	ıs)	•			
14	Description of Col	lateral		15 Check if personal funds w	ere de	posited	into political ac (See Instru		
16	GUARANTOR INFORMATION	17 Name of guarantor					19 Amount Gu	aranteed (S	\$)
	not applicable	18 Guarantor address; Ci	ty; State;	Zip Code					
20	Principal occupation	on		21 Employer (See Instruction	ıs)				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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: 1/1 Rpt: 14/14	Houston 80-20 PAC	00050353
4 Date	5 Payee name	
11/02/2024	Layal Cafe	
6 Amount (\$)	7 Payee address; City; State; Zip Cod	e
\$2,381.50	6328 Richmond Avenue	
Expenditure from		
corporate funds	Houston , TX 77057	
8 PURPOSE OF	, , , , , , , , , , , , , , , , , , , ,	b) Description
EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		fundraising dinner
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	ht Office held
expenditure to benefit 0/0		
Date	Payee name	
11/02/2024	sel fast printing	
Amount (\$)	Payee address; City; State; Zip Cod	е
\$5,117.50	10826 westheimer	
Expenditure from corporate funds	Houston, TX 77042	
PURPOSE OF	· · · · · · · · · · · · · · · · · · ·	b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		post card printing and mailing
Complete ONLY if direct	Candidate/Officeholder name Office sough	ht Office held
expenditure to benefit C/OH		