



# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

|   |   |
|---|---|
| <b>12 COMMITTEE NAME</b><br>Houston 80-20 PAC | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00050353 |
|---|---|

|   |  |  |
|---|--|--|
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported    The Honorable lizzie Fletcher    US CD 7 |
|   |  | B. Opposed   |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported   |
|   |  | B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |

|                               |  |             |
|-------------------------------|--|-------------|
| <b>15 CONTRIBUTION TOTALS</b> | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> | \$ 0.00     |
|                               | <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold                                 |             |
| EXPENDITURE TOTALS            | <b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>  | \$ 7,500.00 |
|                               | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>  | \$ 0.00     |
| CONTRIBUTION BALANCE          | <b>4. TOTAL POLITICAL EXPENDITURES</b>   | \$ 7,499.00 |
|                               | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>  | \$ 111.88   |
| OUTSTANDING LOAN TOTALS       | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>   | \$ 0.00     |

**16 AFFIDAVIT**

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

Mr. Peter Hwang  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

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|---|--|---|
| <b>12 COMMITTEE NAME</b><br>Houston 80-20 PAC   |  | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00050353             |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported The Honorable Al Green US CD 9<br><br>B. Opposed         |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed  |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |   |
|   | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported Mrs. sylvester turner US CD 18<br><br>B. Opposed         |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed  |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |   |
| <b>COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.)    | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported The Honorable Molly cook State Senator<br><br>B. Opposed |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed  |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |   |

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|---|--|--|
| <b>12 COMMITTEE NAME</b><br>Houston 80-20 PAC   |  | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00050353                      |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported Mrs. kathy cheng State Senator<br><br>B. Opposed                  |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |
|   | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported Mr. daniel lee State Representative<br><br>B. Opposed             |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |
| <b>COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.)    | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported The Honorable ron reynolds State Representative<br><br>B. Opposed |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |
|   | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported The Honorable ron reynolds State Representative<br><br>B. Opposed |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |

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|---|--|--|
| <b>12 COMMITTEE NAME</b><br>Houston 80-20 PAC   |  | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00050353                      |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported The Honorable Ieman Ialani State Representative<br><br>B. Opposed |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |
|   | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported The Honorable Gene Wu State Representative<br><br>B. Opposed      |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |
| <b>COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.)    | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported The Honorable Hubert Vo State Representative<br><br>B. Opposed    |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |

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|---|--|--|
| <b>12 COMMITTEE NAME</b><br>Houston 80-20 PAC   |  | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00050353                            |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported Judge Christine weems Supreme Court Justice<br><br>B. Opposed           |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |
|   | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported Mr. Frances bourliot Court Of Criminal Appeals, Judge<br><br>B. Opposed |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |
| <b>COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.)    | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported Mr. sean teare District Attorney, Harris Co.<br><br>B. Opposed          |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed   |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |  |

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|---|--|---|
| <b>12 COMMITTEE NAME</b><br>Houston 80-20 PAC   |  | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00050353                             |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported The Honorable andy meyers<br><br>B. Opposed                              |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed  |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |   |
|   | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported The Honorable nabil shike<br><br>B. Opposed                              |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed  |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |   |
| <b>COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.)    | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported The Honorable carmen turner Harris County Tax Assessor<br><br>B. Opposed |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported<br><br>B. Opposed  |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |   |

# SUBTOTALS - MPAC

|   |   |   |
|---|---|---|
| <b>17 COMMITTEE NAME</b><br>Houston 80-20 PAC |   | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00050353 |
| <b>19 SCHEDULE SUBTOTALS</b>                  |   | SUBTOTAL AMOUNT   |
|   | NAME OF SCHEDULE  |   |
| 1.  | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                 | \$ 7,500.00   |
| 2.  | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                   | \$ 0.00   |
| 3.  | <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS   | \$ 0.00   |
| 4.  | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION               | \$  |
| 5.  | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$  |
| 6.  | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                     | \$  |
| 7.  | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                 | \$  |
| 8.  | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION                 | \$  |
| 9.  | <input checked="" type="checkbox"/> SCHEDULE E: LOANS   | \$ 0.00   |
| 10.   | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS              | \$ 7,499.00   |
| 11.   | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                      | \$ 0.00   |
| 12.   | <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS             | \$ 0.00   |
| 13.   | <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                 | \$ 0.00   |
| 14.   | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                      | \$  |
| 15.   | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER       | \$  |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>                     |  | <b>1</b> Total pages Schedule A1:<br>Sch: 1/3 Rpt: 9/14  |
| <b>2</b> FILER NAME<br>Houston 80-20 PAC   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00050353 |
| <b>4</b> Date<br>11/02/2024  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Calvert, Rogene<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77025 | <b>7</b> Amount of Contribution (\$)<br><br>\$500.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Political consultant |  | <b>9</b> Employer (See Instructions)                     |
| Date<br>11/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Cheng, Kathy (Mrs.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77227               | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)<br>Lawyer                        |  | Employer (See Instructions)                              |
| Date<br>11/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Durrani, Afaq<br><hr/> Contributor address; City; State; Zip Code<br><br>Katy, TX 77450                        | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)<br>Engineer                      |  | Employer (See Instructions)<br>Self                      |
| Date<br>11/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Fong, Cecil<br><hr/> Contributor address; City; State; Zip Code<br><br>Houston, TX 77071                       | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)<br>Retired                       |  | Employer (See Instructions)                              |
| Date<br>11/02/2024   | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Green, Al (The Honorable)<br><hr/> Contributor address; City; State; Zip Code<br><br>houston, TX 77027         | Amount of Contribution (\$)<br><br>\$500.00              |
| Principal occupation / Job title (See Instructions)<br>US Congressman                |  | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>            |   | <b>1</b> Total pages Schedule A1:<br>Sch: 2/3 Rpt: 10/14 |
| <b>2</b> FILER NAME<br>Houston 80-20 PAC                                    |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00050353 |
| <b>4</b> Date<br>11/02/2024   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Hwang, Peter | <b>7</b> Amount of Contribution (\$) \$500.00            |
| <b>6</b> Contributor address; City; State; Zip Code<br><br>Humble, TX 77396 |   |  |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>manager     |   | <b>9</b> Employer (See Instructions)<br>self             |
| Date<br>11/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Liu, Xin (Mr.)        | Amount of Contribution (\$) \$500.00                     |
| Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584        |   |  |
| Principal occupation / Job title (See Instructions)<br>IT                   |   | Employer (See Instructions)                              |
| Date<br>11/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Pei, Shin Shem        | Amount of Contribution (\$) \$500.00                     |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77096         |   |  |
| Principal occupation / Job title (See Instructions)<br>Professor            |   | Employer (See Instructions)<br>University of Houston     |
| Date<br>11/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Ray, Chiu-Wen (Mrs.)  | Amount of Contribution (\$) \$500.00                     |
| Contributor address; City; State; Zip Code<br><br>Woodland, TX 77382        |   |  |
| Principal occupation / Job title (See Instructions)<br>Retired              |   | Employer (See Instructions)                              |
| Date<br>11/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ )<br>Sha, Li (Mrs.)        | Amount of Contribution (\$) \$500.00                     |
| Contributor address; City; State; Zip Code<br><br>Houston, TX 77024         |   |  |
| Principal occupation / Job title (See Instructions)<br>restaurant owner     |   | Employer (See Instructions)                              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |  |   |
|---|--|---|
| <b>The Instruction Guide explains how to complete this form.</b>              |  | 1 Total pages Schedule A1:<br>Sch: 3/3 Rpt: 11/14       |
| 2 FILER NAME<br>Houston 80-20 PAC   |  | 3 Filer ID (Ethics Commission Filers)<br>00050353       |
| 4 Date<br>11/02/2024  | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Shih, Helen (Mrs.)    | 7 Amount of Contribution (\$)<br>\$500.00               |
|   | 6 Contributor address; City; State; Zip Code<br><br>Pearland, TX 77584                                     |   |
| 8 Principal occupation / Job title (See Instructions)<br>Vision-Mission Coach |  | 9 Employer (See Instructions)                           |
| Date<br>11/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Tameez, mustafa         | Amount of Contribution (\$)<br>\$500.00                 |
|   | Contributor address; City; State; Zip Code<br><br>Houston, TX 77002  |   |
| Principal occupation / Job title (See Instructions)<br>Self                   |  | Employer (See Instructions)<br>Outreach                 |
| Date<br>11/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>lin, chimei             | Amount of Contribution (\$)<br>\$500.00                 |
|   | Contributor address; City; State; Zip Code<br><br>Houston, TX 77036  |   |
| Principal occupation / Job title (See Instructions)<br>manager                |  | Employer (See Instructions)<br>Chinese Community Center |
| Date<br>11/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>turner, sylvester (Mr.) | Amount of Contribution (\$)<br>\$500.00                 |
|   | Contributor address; City; State; Zip Code<br><br>Houston, TX 77008  |   |
| Principal occupation / Job title (See Instructions)<br>community leader       |  | Employer (See Instructions)                             |
| Date<br>11/02/2024  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>yang, Dequing (Mr.)     | Amount of Contribution (\$)<br>\$500.00                 |
|   | Contributor address; City; State; Zip Code<br><br>Houston, TX 77036  |   |
| Principal occupation / Job title (See Instructions)<br>owner                  |  | Employer (See Instructions)<br>Allwin Insurance         |

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:  
Sch: 1/1 Rpt: 12/14

2 FILER NAME  
Houston 80-20 PAC

3 Filer ID (Ethics Commission Filers)  
00050353

4 TOTAL OF UNITEMIZED PLEDGES

\$ 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 outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

# LOANS

# SCHEDULE E

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>           |  | <b>1</b> Total pages Schedule E:<br>Sch: 1/1 Rpt: 13/14  |
| <b>2</b> FILER NAME<br>Houston 80-20 PAC                                   |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00050353   |
| <b>4</b> TOTAL OF UNITEMIZED LOANS   |  | <b>\$</b> 0.00   |
| <b>5</b> Date of loan  | <b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) | <b>9</b> Loan Amount (\$)  |
| <b>6</b> Is lender a financial institution?                                | <b>8</b> Lender address; City; State; Zip Code                                 | <b>10</b> Interest Rate  |
|  |  | <b>11</b> Maturity Date  |
| <b>12</b> Principal occupation / Job title (See Instructions)              |  | <b>13</b> Employer (See Instructions)  |
| <b>14</b> Description of Collateral<br><input type="checkbox"/> None       |  | <b>15</b> Check if personal funds were deposited into political account (See Instructions)<br><input type="checkbox"/> |
| <b>16</b> GUARANTOR INFORMATION<br><input type="checkbox"/> not applicable | <b>17</b> Name of guarantor  | <b>19</b> Amount Guaranteed (\$)   |
|  | <b>18</b> Guarantor address; City; State; Zip Code                             |  |
| <b>20</b> Principal occupation   |  | <b>21</b> Employer (See Instructions)  |

# 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  
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

|  |  |  |
|--|--|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/1 Rpt: 14/14 | <b>2</b> FILER NAME<br>Houston 80-20 PAC | <b>3</b> Filer ID (Ethics Commission Filers)<br>00050353 |
|--|--|--|

|                             |                                   |
|-----------------------------|-----------------------------------|
| <b>4</b> Date<br>11/02/2024 | <b>5</b> Payee name<br>Loyal Cafe |
|-----------------------------|-----------------------------------|

|   |   |
|---|---|
| <b>6</b> Amount (\$)<br>\$2,381.50<br><br><input type="checkbox"/> Expenditure from corporate funds | <b>7</b> Payee address; City; State; Zip Code<br>6328 Richmond Avenue<br><br>Houston , TX 77057 |
|---|---|

|                                 |  |  |
|---------------------------------|--|--|
| <b>8</b> PURPOSE OF EXPENDITURE | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fundraising dinner |
|---------------------------------|--|--|

|   |                             |               |             |
|---|-----------------------------|---------------|-------------|
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

|                    |                                 |
|--------------------|---------------------------------|
| Date<br>11/02/2024 | Payee name<br>sel fast printing |
|--------------------|---------------------------------|

|  |   |
|--|---|
| Amount (\$)<br>\$5,117.50<br><br><input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code<br>10826 westheimer<br><br>Houston, TX 77042 |
|--|---|

|                               |  |  |
|-------------------------------|--|--|
| <b>PURPOSE OF EXPENDITURE</b> | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>post card printing and mailing |
|-------------------------------|--|--|

|  |                             |               |             |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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