FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00068227 3 COMMITTEE NAME **OFFICE USE ONLY** Aransas-Corpus Christi Pilots PAC Date Received **ELECTRONICALLY FILED** 01/13/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 2767 Date Hand-delivered or Date Postmarked Change of Address Corpus Christi, TX 78403 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Misty R. NAME NICKNAME LAST **SUFFIX** Tucker STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 710 Buffalo, Ste. 611 STREET **ADDRESS** (Residence or Business) Corpus Christi, TX 78401 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** P.O. Box 2767 MAILING **ADDRESS** Corpus Christi, TX 78403 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (361) 884-5849 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME				13 Fi	ler ID	(Ethics Commission Filers)
Aransas-Corpus Christi I	Pilots PAC				068227	,
4 COMMITTEE	1. Candidates	A. Supported				
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
-	2. Measures	A. Supported				
	(Describe by date and location of election and nature of issue.)					
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANTE MADE ELECTRO		THAN	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE		FIONS OR GUARANTEES OF L	.OANS)	\$	21,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EX	PENDITURES		\$	0.00
	4. TOTAL POLITICA	AL EXPENDITU	IRES		\$	38,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN		S MAINTAINED AS OF T	HE LAST DAY	\$	19,266.95
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A		L OUTSTANDING LOAN RIOD	S AS OF THE	\$	0.00
AFFIDAVIT						
		tru	swear, or affirm, under pe ue and correct and include nder Title 15, Election Coo	es all information		
				Mrs. Mish. D. T		
		_		Mrs. Misty R. T ture of Campaig		 er
AFFIX NOTARY !	STAMP / SEAL ABOVE		Jigila	ture or oumpary	iii iicasai	oi.
Sworn to and authorities of	noforo mo by the said			thin the		dov
Sworn to and subscribed b					=	day
01	, 20, to certify (William, Withess in	y mand and scar or office.			

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

				3 of 18
17 COM	MITTE	(Ethics Commission Filers)		
Aran	sas-C	00068227		
19 SCHE NAME	EDULE	SUBTOTAL AMOUNT		
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 21,000.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION)R	\$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 38,000.00
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$ 3.00
15.	15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$			

	MONET	ARY POLITICAL CONTRIBUTION	ON	IS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 1/5 Rpt: 4/18	
2	FILER NAME Aransas-Cor	pus Christi Pilots PAC			3	Filer ID (Ethics Commission 00068227	on Filers)
4	Date 11/19/2024	 Full name of contributor	:)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu Pilot	Corpus Christi, TX 78414 pation / Job title (See Instructions)	9	Employer (See Instructions Aracor, Inc.	<u> </u> s)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID# Anderson, Justin (Capt.) Contributor address; City; State; Zip Code Rockport, TX 78382	:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Pilot	pation / Job title (See Instructions)		Employer (See Instructions Aracor, Inc.	<u>l</u> s)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID# Conway, Stephen (Capt.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Pilot	Corpus Christi, TX 78413 pation / Job title (See Instructions)		Employer (See Instructions Aracor, Inc.	<u> </u> s)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID# Dooley, James (Capt.) Contributor address; City; State; Zip Code Portland, TX 78374			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Pilot	pation / Job title (See Instructions)		Employer (See Instructions Aracor, Inc.	<u>l</u> 5)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID# Edwards, Lucius (Capt.) Contributor address; City; State; Zip Code Port Aransas, TX 78373	:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Pilot	pation / Job title (See Instructions)		Employer (See Instructions Aracor, Inc.	5)		

	MONET	ARY POLITICAL CONTRIBUTION)N	IS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 2/5 Rpt: 5/18	
2	FILER NAME Aransas-Cor	pus Christi Pilots PAC			3	Filer ID (Ethics Commission 00068227	on Filers)
4	Date 11/19/2024	 5 Full name of contributor out-of-state PAC (ID#:_ Fontenot, Cory (Capt.) 6 Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$1,000.00
_	District	Rockport, TX 78382	٦	Faralassa (Caralassa tians			
8	Principal occu Pilot	pation / Job title (See Instructions)	9	Employer (See Instructions Aracor, Inc.	5)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_Fossati, Kate (Capt.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Rockport, TX 78382 pation / Job title (See Instructions)	_	Employer (See Instructions	;)		
Pilot Aracor, Inc.		,					
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ Grumbles, Bobby (Capt.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Port Aransas, TX 78373					
	Principal occu Pilot	pation / Job title (See Instructions)		Employer (See Instructions Aracor, Inc.	5)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_Lindgren, Colleen (Capt.) Contributor address; City; State; Zip Code Rockport, TX 78382)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Pilot	pation / Job title (See Instructions)		Employer (See Instructions Aracor, Inc.	5)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_Logan, Jack (Capt.) Contributor address; City; State; Zip Code Rockport, TX 78382)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Pilot	pation / Job title (See Instructions)		Employer (See Instructions Aracor, Inc.	5)		

MONETARY POLITICAL CONTRIBUTIONS							SCHEDULE A1			
	The Instru	ction Guide explains how	v to complete this for	rm	ı .	1	Total pages Schedule A1: Sch: 3/5 Rpt: 6/18			
2	FILER NAME Aransas-Cor	pus Christi Pilots PAC				3	Filer ID (Ethics Commission 00068227	on Filers)		
4	Date 11/19/2024	5 Full name of contributor Lynch, Matthew P. (Capt.6 Contributor address; City; S	·)	7	Amount of Contribution (\$)	\$1,000.00		
_		Rockport, TX 78382	. 1-							
8	Principal occu Pilot	pation / Job title (See Instructions	s) 9		Employer (See Instructions Aracor, Inc.)				
	Date 11/19/2024	Full name of contributor Miller, Ryan (Capt.) Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$1,000.00		
	Principal occu	Corpus Christi, TX 78413 pation / Job title (See Instructions			Employer (See Instructions)				
Pilot Aracor, Inc.		,								
	Date 11/19/2024	Full name of contributor Monaco, Kevin (Capt.) Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$1,000.00		
		Rockport, TX 78382								
	Principal occu Pilot	pation / Job title (See Instructions	5)		Employer (See Instructions Aracor, Inc.)				
	Date 11/19/2024	Full name of contributor Olson, Todd (Capt.) Contributor address; City; S Port Aransas, TX 78373	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$1,000.00		
	Principal occu Pilot	pation / Job title (See Instructions	5)		Employer (See Instructions Aracor, Inc.)				
	Date 11/19/2024	Full name of contributor Read, Ryan (Capt.) Contributor address; City; S Corpus Christi, TX 78414	·)		Amount of Contribution (\$)	\$1,000.00		
	Principal occu Pilot	pation / Job title (See Instructions	5)		Employer (See Instructions Aracor, Inc.)				
			<u>, </u>							

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1			
	The Instruc	ction Guide explains how to co	omplete this form	1.	1	Total pages Schedule A1: Sch: 4/5 Rpt: 7/18			
2	FILER NAME Aransas-Cor	pus Christi Pilots PAC			3	Filer ID (Ethics Commission 00068227	on Filers)		
4	Date 11/19/2024	 5 Full name of contributor out Royo, Carlos (Capt.) 6 Contributor address; City; State; Zip 	t-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00		
8	Principal occu	Rockport, TX 78382 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>				
	Pilot			Aracor, Inc.					
	Date 11/19/2024	Full name of contributor out Shults, Andrew (Capt.) Contributor address; City; State; Zip	t-of-state PAC (ID#: D Code)		Amount of Contribution (\$)	\$1,000.00		
		Port Aransas, TX 78373							
Principal occupation / Job title (See Instructions) Pilot Employer (See Instruction Aracor, Inc.)							
	Date 11/19/2024	Full name of contributor out Watson, Benjamin (Capt.) Contributor address; City; State; Zip	t-of-state PAC (ID#: o Code			Amount of Contribution (\$)	\$1,000.00		
		Rockport, TX 78382							
	Principal occu Pilot	pation / Job title (See Instructions)		Employer (See Instructions Aracor)				
	Date 11/19/2024	Full name of contributor out Webb, Earl (Capt.) Contributor address; City; State; Zip Rockport, TX 78382	t-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00		
	Principal occu Pilot	pation / Job title (See Instructions)		Employer (See Instructions Aracor, Inc.)				
	Date 11/19/2024	Full name of contributor out White, Matthew (Capt.) Contributor address; City; State; Zip Corpus Christi, TX 78413	t-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00		
	Principal occu Pilot	pation / Job title (See Instructions)		Employer (See Instructions Aracor, Inc.)				
			•						

	MONET	ARY POLITICAL CONTRIBUTION)NS	5			SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm	ı .	1	Total pages Sc Sch: 5/5 Rpt:		
2	FILER NAME	rpus Christi Pilots PAC			3	Filer ID (Ethic	cs Commissio	n Filers)
4	Date 11/19/2024	 Full name of contributor)	7	Amount of Con	tribution (\$)	\$1,000.00
8	Principal occu Pilot	Corpus Christi, TX 78414 spation / Job title (See Instructions)		Employer (See Instructions Aracor, Inc.)			

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)

Candidate/Officeholder/Politica Credit Card Payment	
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: 1/9 Rpt: 9/18	Aransas-Corpus Christi Pilots PAC 00068227
4 Date	5 Payee name
11/19/2024	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
8 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.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Political Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/18/2024	Armando (Mando) Martinez
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 1651
Expenditure from corporate funds	Weslaco, TX 78596
•	
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
	Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/18/2024	Borris Miles Campaign
Amount (\$)	Payee address; City; State; Zip Code 5302 Almeda Rd.
\$1,000.00	5302 Aimeua Ru.
Expenditure from	
corporate funds	Houston, TX 77004
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
	Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
·	

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: 2/9 Rpt: 10/18	Aransas-Corpus Christi Pilots PAC 00068227
4 Date	5 Payee name
10/18/2024	Brooks Landgraf Campaign
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 13146
Expenditure from corporate funds	Odessa, TX 79768
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
	Political Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	1
Date	Payee name
10/18/2024	Bryan Hughes for Texas Senate
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 450
Expenditure from corporate funds	Mineola, TX 75773
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
	Total Contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/13/2024	Carol Alvarado Campaign
	1 2
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 230842
Expenditure from corporate funds	Houston, TX 77223
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Political Contribution
Complete <u>ONLY</u> 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

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		nittee L	egal Services	n Guide explain:		ages	/Contract Labor		OTHER (enter	a category not	listed above)
_	T	I		The motification	- Cuide explain			1	_	F1 15	(E11-1 O	
1	Total pages Schedule F1:	l							3	Filer ID	`	mmission Filers)
	Sch: 3/9 Rpt: 11/18	A	ransas-Cor	pus Christi I	Pilots PAC					00068227	,	
4	Date	5 Pa	ayee name									
	10/18/2024	c	Charles Perr	y Campaigr	1							
6	Amount (\$)	7 Pá	ayee address	s; City;	State	e; Zip Co	de					
	\$1,000.00	P	O Box 9480)6								
	, -,			-								
	Expenditure from	١.										
<u>_</u>	corporate funds	Lı	ubbock, TX	79493								
8	PURPOSE	(a) C	ategory (See	Categories listed	at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE		Contributions		-			므		ide of Texas. Co		e T.
	EXI ENDITORE	C	Candidate/O	fficeholder/F	Political Com	mittee		_		, officeholder livi	ng expense	
								Political Cont	rıbı	ution		
9	Complete ONLY if direct		ndidate/Offic	eholder name)	Office sou	ght			Office	held	
	expenditure to benefit C/O	Н										
	Date	Pá	ayee name									
	11/19/2024	l	enise Villal	obos Campa	aian							
	Amount (\$)		ayee address			e; Zip Co	do					
	` '	l	•		Stati	e, zip co	ue					
	\$1,000.00	3.	122 Creek S	side Dr.								
_	T Expenditure from											
_	corporate funds	C	Corpus Chris	ti , TX 7841	.0							
	PURPOSE	(a) C	ategory (See	Categories listed	at the top of this so	chedule)	(b)	Description				
	OF	1	Contributions			,		_	outs	ide of Texas. Co	mplete Schedul	e T.
	EXPENDITURE				Political Ćomi	mittee		Check if Austin,	, TX	, officeholder livi	ng expense	
								Political Cont	rib	ution		
	Complete ONLY if direct		ndidate/Offic	eholder name)	Office sou	ght			Office	held	
	expenditure to benefit C/O	Н										
	Date	P	ayee name									
	11/19/2024	l	Elect Adam I	dinninsa Ca	mnaign							
	Amount (\$)	l	ayee address	•	State	e; Zip Co	de					
	\$2,500.00	P	O Box 1830)1								
	- Evnanditura from											
	Expenditure from corporate funds	c	Corpus Chris	ti , TX 7848	30							
	PURPOSE	(a) C	atenory (see	Catagorias listos	at the top of this so	obodulo)	(b)	Description				
	OF		Contributions			criedule)	()		outs	ide of Texas. Co	mplete Schedul	е Т.
	EXPENDITURE				Political Com	mittee		브		, officeholder livi		
						-		Political Cont	rib	ution		
	Complete ONLY if direct	Car	ndidate/Offic	eholder name)	Office sou	ght			Office	held	
	expenditure to benefit C/O					J20 004	J. /•			200		

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal manua Cabadula E4.	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 4/9 Rpt: 12/18	2 FILER NAME Aransas-Corpus Christi Pilots PAC 3 Filer ID (Ethics Commission Filers) 00068227
4 Date	5 Payee name
10/18/2024	Erin Gamez Campaign
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 777 E Harrison St.
Ψ000.00	THE Harison of
Expenditure from corporate funds	Brownsville, TX 78520
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 Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Total Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/29/2024	J.M. Lozano for State Rep. Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	727 Arroyo Drive
Expenditure from corporate funds	Kingsville, TX 78363
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
	1 ontical contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Data	
Date	Payee name
10/18/2024	Jared Patterson
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	4412 Sapphire Drive
Expenditure from corporate funds	Frisco, TX 75034
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
Z. ZADITORE	Candidate/Officeholder/Political Committee
	Political Contribution
Complete CALL V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/9 Rpt: 13/18	Aransas-Corpus Christi Pilots PAC 00068227
4 Date	5 Payee name
10/18/2024	Mary Ann Perez Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	6200 Gulf Fwy, #125
Expenditure from corporate funds	Houston, TX 77023
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Political Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	
Date	Payee name
10/18/2024	Phil King Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 1913
Expenditure from corporate funds	Weatherford, TX 76086
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
	1 ontical contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/18/2024	Royce West Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	320 South R.L. Thornton Freeway
	Suite 210
Expenditure from corporate funds	Dallas, TX 75203
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Political Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	

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

nent Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHED Control of Cathery a cathery net listed above)

Candidate/Officeholder/Politica Credit Card Payment				
Great Sara r ayment	The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 6/9 Rpt: 14/18	Aransas-Corpus Christi Pilots PAC 00068227			
4 Date	5 Payee name			
10/18/2024	Ryan Guillen Campaign			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$500.00	PO Box 1024			
Expenditure from corporate funds	Austin, TX 78767			
8 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.			
EXPENDITORE	Candidate/Officeholder/Political Committee			
	Political Contribution			
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI	1			
Date	Payee name			
10/18/2024	Tan Parker Campaign			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00	PO Box 271741			
Expenditure from corporate funds	Flower Mound, TX 75027			
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.			
EXPENDITURE	Candidate/Officeholder/Political Committee			
	Political Contribution			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
experialiture to beliefit C/OI	'			
Date	Payee name			
10/18/2024	Terry Canales Campaign			
Amount (\$)	Payee address; City; State; Zip Code			
\$2,500.00	2727 W. University Dr.			
Expenditure from corporate funds	Edinburg, TX 78539			
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			
	Political Contribution			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OH				

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

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: 7/9 Rpt: 15/18	Aransas-Corpus Christi Pilots PAC 00068227		
4 Date	5 Payee name		
11/19/2024	Texans for Dan Patrick		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$5,000.00	Po Box 685085		
Expenditure from corporate funds	Austin, TX 78768		
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 Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Candidate/Officeholder/Political Committee		
	Political Contribution		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
11/19/2024	Texans for Greg Abbott		
Amount (\$)			
\$10,000.00	PO Box 308		
Evponditure from			
Expenditure from corporate funds	Austin, TX 78767		
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	Continuouions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense		
	Political Contribution		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OI			
Date	Payee name		
10/18/2024	Texans for Kelly Hancock		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,000.00	PO Box 821349		
Ψ1,000.00	1 O BOX 021343		
Expenditure from			
corporate funds	North Richland Hills, TX 76182		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF	Contributions/Donations Made By		
EXPENDITURE	Candidate/Officeholder/Political Committee		
	Political Contribution		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OH			

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) The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 8/9 Rpt: 16/18	Aransas-Corpus Christi Pilots PAC 00068227		
4 Date	5 Payee name		
10/18/2024	Todd Hunter Campaign		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$1,000.00	445 Cape Henry		
Expenditure from corporate funds	Corpus Christi, TX 78412		
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		
	Political Contribution		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
11/19/2024	Todd Hunter Campaign		
Amount (\$)	Payee address; City; State; Zip Code		
\$2,500.00	445 Cape Henry		
Expenditure from corporate funds	Corpus Christi, TX 78412		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Contributions/Donations Made By		
	Candidate/Officeholder/Political Committee		
	Political Contribution		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
Date	Payee name		
10/18/2024	Will Metcalf Campaign		
Amount (\$)	Payee address; City; State; Zip Code		
\$500.00	PO Box 454		
φ500.00	PO BOX 454		
Expenditure from corporate funds	Conroe, TX 77305		
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.		
LAFLINDITURE	Candidate/Officeholder/Political Committee		
	Political Contribution		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OH			

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

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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: 9/9 Rpt: 17/18	Aransas-Corpus Christi Pilots PAC 00068227
4 Date	5 Payee name
10/18/2024	Yvonne Davis Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	PO Box 763368
Expenditure from corporate funds	Dallas, TX 75376
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Political Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
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	AL EXPENDITURES POLITICAL CONTRIBUTIONS	SCHEDULE I			
The Instruction Guide explains how to complete this form.					
1 Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Aransas-Corpus Christi Pilots PAC	3 Filer ID (Ethics Commission Filers) 00068227			
4 Date 07/31/2024	5 Payee name Frost Bank				
6 Amount (\$) 3.00 Expenditure from corporate funds	7 Payee Address; City; State; Zip PO Box 1600 San Antonio, TX 78296				
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Bank Fees			