#### GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

# FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form	Filer ID     (Ethics Commission Filers)     00070183	2 Total pages filed: 17
3 COMMITTEE NAME		OFFICE USE ONLY
Association of Retired Houston Municipal Employees PAC		Date Received ELECTRONICALLY FILED 01/15/2025
4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE	
ADDRESS P.O. Box 40354		Date Hand-delivered or Date Postmarked
Change of Address		
Houston, TX 77240		Receipt # Amount
		Date Processed
		Date Imaged
5 CAMPAIGN MS / MRS / MR FIRST TREASURER M		MI
NAME Mr. AI		
NICKNAME LAST		SUFFIX
Mays		
6 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE	;); APT / SUITE #; CITY;	STATE; ZIP CODE
TREASURER STREET 10517 Willowgrove Drive		
ADDRESS		
(Residence or Business) Houston, TX 77035		
7 CAMPAIGN STREET OR PO BOX;	APT / SUITE #; CITY;	STATE; ZIP CODE
TREASURER MAILING 10517 Willowgrove Drive		
ADDRESS		
Change of Address Houston, TX 77035		
8 CAMPAIGN AREA CODE PHONE NUMBER	EXTENSION	
TREASURER PHONE (713) 302-4484		
9 REPORT X January 15	30th day before election	Dissolution (Attach PAC-DR)
	8th day before election	10th day after campaign treasurer
July 15	Runoff	termination
	Ruiloii	
10 PERIOD Month Day Year COVERED 07/01/2024	Month Day	Year
07/01/2024	THROUGH 12/31/2024	ŀ
11 ELECTION ELECTION DATE	ELECTION TYPE	
Month Day Year		Other
11/05/2024		
	General	
G	TO PAGE 2	
Forms provided by Texas Ethics Commission www	.ethics.state.tx.us	Version V4.1.0.5dd2ace2

#### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 File	r ID (Ethics Commission Filers)
Association of Retired H	louston Municipal Emp	loyees PAC	000	70183
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER TH OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	HAN	\$ 3,657.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOA	ANS)	\$ 4,497.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$ 3,071.31
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE G PERIOD	E LAST DAY	\$ 64,918.74
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS A REPORTING PERIOD	AS OF THE	\$ 0.00
16 AFFIDAVIT				
		I swear, or affirm, under penal true and correct and includes under Title 15, Election Code.	all information i	
			Mr. Al Mays	
		Signatur	e of Campaign	
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said		, this the	day
		which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title	e of officer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2

#### SUBTOTALS - GPAC

## FORM GPAC COVER SHEET PG 3

3 of 17

17 COMMITTE Associatio	EE NAME on of Retired Houston Municipal Employees PAC	18 Filer ID 00070183	(Ethics Commission Filers)
	E SUBTOTALS		SUBTOTAL AMOUNT
NAME OF	SCHEDULE		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 4,497.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABC ORGANIZATION	R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	TION 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	6	<b>\$</b> 3,071.31
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.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
15. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	<b>\$</b> 919.85

The Instrue	ction Guide explains how to complete this f	<sup>o</sup> orm.	1 Total pages Schedule A1: Sch: 1/9 Rpt: 4/17
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Association (	of Retired Houston Municipal Employees PAC		00070183
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
07/31/2024	Bravenec, George (Mr.)		\$20.00
	6 Contributor address; City; State; Zip Code		
	Cypress, TX 77433	1	
	pation / Job title (See Instructions)	9 Employer (See Instructions	\$)
Retired		n/a	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
08/31/2024	Bravenec, George (Mr.)		\$20.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
Drincinal occu		Employer (See Instructions	~\
Retired	ipation / Job title (See Instructions)	Employer (See Instructions n/a	»)
			Amount of Contribution (\$)
Date 09/30/2024	Full name of contributor out-of-state PAC (ID#: Bravenec, George (Mr.)	)	Amount of Contribution (\$) \$20.00
09/30/2024			ψ20.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	\$)
Retired		n/a	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/31/2024	Bravenec, George (Mr.)		\$20.00
	Contributor address; City; State; Zip Code		1
	Cypress, TX 77433	1	
-	ipation / Job title (See Instructions)	Employer (See Instructions	3)
Retired		n/a	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
11/30/2024	Bravenec, George (Mr.)		\$20.00
	Contributor address; City; State; Zip Code		
	Cypress, TX 77433		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Retired		n/a	"

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 2/9 Rpt: 5/17	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	rs)
	of Retired Houston Municipal Employees PAC		00070183	.,
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
12/31/2024	Bravenec, George (Mr.)		\$2	20.00
	6 Contributor address; City; State; Zip Code			
C Dringing occu	Cypress, TX 77433	Content (See Instructions		
8 Principal occu Retired	upation / Job title (See Instructions)	<ul> <li>9 Employer (See Instructions n/a</li> </ul>	)	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	~~ ~~
07/31/2024	Gaudin, Wayne (Mr.)		Φ2	20.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77073-3422			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>.</u>	
Retired		n/a	)	
Date	Full name of contributor out-of-state PAC (ID#:_	<u> </u>	Amount of Contribution (\$)	
08/31/2024	Gaudin, Wayne (Mr.)	/		20.00
00.01.11	Contributor address; City; State; Zip Code			_0.0_
	Houston, TX 77073-3422			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)	
Retired		n/a		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/30/2024	Gaudin, Wayne (Mr.)		\$2	20.00
	Contributor address; City; State; Zip Code			
Driv single age	Houston, TX 77073-3422		、	
Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions n/a	)	
			· - · · · / //	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	~~ ~~
10/31/2024	Gaudin, Wayne (Mr.)		Φ2	20.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77073-3422			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	() ()	
Retired		n/a	)	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 3/9 Rpt: 6/17	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers	s)
	of Retired Houston Municipal Employees PAC		00070183	
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
11/30/2024	Gaudin, Wayne (Mr.)		\$2	20.00
	6 Contributor address; City; State; Zip Code			
	Houston, TX 77073-3422			
-	pation / Job title (See Instructions)	9 Employer (See Instructions	)	
Retired		n/a		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
12/31/2024	Gaudin, Wayne (Mr.)		\$2	20.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77073-3422			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
Retired		n/a		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
07/31/2024	Harkins, Michael (Mr.)			20.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77080			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
Retired		n/a		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
08/31/2024	Harkins, Michael (Mr.)		\$2	20.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77080			
	pation / Job title (See Instructions)	Employer (See Instructions	)	
Retired		n/a		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/30/2024	Harkins, Michael (Mr.)		\$2	20.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77080			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
Retired		n/a		

			1 Total pages Schedule A1:	
The Instru	iction Guide explains how to complete this	form.	Sch: 4/9 Rpt: 7/17	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers	s)
Association	of Retired Houston Municipal Employees PAC		00070183	-
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)	
10/31/2024	Harkins, Michael (Mr.)		\$2	20.00
	6 Contributor address; City; State; Zip Code			
	Herrotop TV 77000			
Drincinal occu	Houston, TX 77080 upation / Job title (See Instructions)	9 Employer (See Instructions)	<u> </u>	
Retired		n/a	)	
	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
Date 11/30/2024	Full name of contributor out-of-state PAC (ID#: Harkins, Michael (Mr.)	)	Amount of Contribution (\$)	20.00
11/30/2027			ΨĹ	0.00
	Houston, TX 77080			
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Retired		n/a		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
12/31/2024	Harkins, Michael (Mr.)		\$2	20.00
	Contributor address; City; State; Zip Code			
	Haustan TV 77090			
Drincinal occu	Houston, TX 77080 upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>	
Retired		n/a	)	
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)	
07/31/2024	Full name of contributor out-of-state PAC (ID#: Mussio, Guadalupe V	)		20.00
01101/202.	Contributor address; City; State; Zip Code			.0.00
	Houston, TX 77083			
Principal occı	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Retired		n/a		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
08/31/2024	Mussio, Guadalupe V		\$2	20.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77083			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>	
Retired		n/a	)	
1100100		1174		

on Filers) \$20.00
\$20.00
\$20.00
\$20.00
\$20.00
\$20.00
\$20.00

L						
	The Instru	ction Guide explains how to complete this f	orm.		ges Schedule A1: 9 Rpt: 9/17	
2	FILER NAME			3 Filer ID	(Ethics Commission	n Filers)
	Association	of Retired Houston Municipal Employees PAC		000701		-
4	Date	5 Full name of contributor of-state PAC (ID#:_	)	7 Amount	of Contribution (\$)	
	08/31/2024	Newman, Roderick (Mr.)				\$20.00
	I	6 Contributor address; City; State; Zip Code				
		Missouri City, TX 77489				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Retired		n/a			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount	of Contribution (\$)	
	09/30/2024	Newman, Roderick (Mr.)				\$20.00
		Contributor address; City; State; Zip Code				
		Missouri City, TX 77489				
		upation / Job title (See Instructions)	Employer (See Instructions	)		
	Retired		n/a			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount	of Contribution (\$)	
	10/31/2024	Newman, Roderick (Mr.)				\$20.00
	1	Contributor address; City; State; Zip Code				
	<u></u>	Missouri City, TX 77489	1 <u> </u>			
	Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions	)		
			n/a			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount	of Contribution (\$)	
	11/30/2024	Newman, Roderick (Mr.)				\$20.00
		Contributor address; City; State; Zip Code				
		Missouri City, TX 77489				
┝	Drincinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>\</u>		
	Retired		n/a	)		
╞				• • • • • • • • •		
	Date 12/31/2024	Full name of contributor out-of-state PAC (ID#:	)	Amouni	of Contribution (\$)	ቀኃብ በበ
	12/31/2024	Newman, Roderick (Mr.)				\$20.00
		Contributor address; City; State; Zip Code				
		Missouri City, TX 77489				
$\vdash$	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	۱		
	Retired		n/a	)		
┝			100			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 7/9 Rpt: 10/17	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)	$\neg$
Association	of Retired Houston Municipal Employees PAC		00070183	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
07/31/2024	Rivers, Bobby Mark (Mr.)		\$20.	.00
	6 Contributor address; City; State; Zip Code			
		ļ		
	Houston, TX 77007			
	upation / Job title (See Instructions)	9 Employer (See Instructions)	.)	
Retired		n/a		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
08/31/2024	Rivers, Bobby Mark (Mr.)		\$20.	.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77007	]		
-	upation / Job title (See Instructions)	Employer (See Instructions)	)	
Retired		n/a		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
09/30/2024	Rivers, Bobby Mark (Mr.)		\$20.	.00
	Contributor address; City; State; Zip Code			
Di dadaaa	Houston, TX 77007		Ļ	
Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions)	)	
		n/a		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
10/31/2024	Rivers, Bobby Mark (Mr.)		\$20.	.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77007			
Drincinal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
Retired		n/a	)	
				_
Date	Full name of contributor out-of-state PAC (ID#: Divers_ Robby Mark (Mr.)	)	Amount of Contribution (\$)	. 00
11/30/2024	Rivers, Bobby Mark (Mr.)	ļ	\$20.	.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77007			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>l</u>	
Retired		n/a	)	
		- The		

_				<u> </u>		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/9 Rpt: 11/17	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
-		of Retired Houston Municipal Employees PAC			00070183	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	
	12/31/2024	Rivers, Bobby Mark (Mr.)				\$20.00
		6 Contributor address; City; State; Zip Code		1		
<u> </u>	<u></u>	Houston, TX 77007	1 <u>-</u> , /o hadmadian	Ĺ		
8	Principal occu Retired	upation / Job title (See Instructions)	9 Employer (See Instructions n/a	3)		
			n/a	<del>—</del>		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	÷20.00
	07/31/2024					\$20.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77089				
┝──	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions			
	Retired		n/a	5)		
⊨				<del>—</del>	Amount of Contribution (\$)	
	Date	Full name of contributor out-of-state PAC (ID#:)	)		Amount of Contribution (\$)	¢20.00
	08/31/2024	Vara, Lonnie (Mr.)				\$20.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77089				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Retired		n/a	-,		
╞	Date	Full name of contributor Out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	09/30/2024	Vara, Lonnie (Mr.)				\$20.00
		Contributor address; City; State; Zip Code				·
		Houston, TX 77089				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u>.</u> s)		
	Retired		n/a			
Γ	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/31/2024	Vara, Lonnie (Mr.)				\$20.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77089				
		upation / Job title (See Instructions)	Employer (See Instructions	S)		
	Retired		n/a			
						ſ

## MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 9/9 Rpt: 12/17 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Association of Retired Houston Municipal Employees PAC 00070183 5 Full name of contributor Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 7 11/30/2024 \$20.00 Vara, Lonnie (Mr.) 6 Contributor address; City; State; Zip Code Houston, TX 77089 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired n/a Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) ) 12/31/2024 \$20.00 Vara, Lonnie (Mr.) Contributor address; City; State; Zip Code Houston, TX 77089 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired n/a

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1
-------------

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 1/1 Rpt: 13/17	2       FILER NAME       3       Filer ID       (Ethics Commission Filers)         Association of Retired Houston Municipal Employees PAC       00070183
4 Date 08/08/2024	<ul> <li>5 Payee name</li> <li>Association of Retired Houston Municipal Employees (ARHME)</li> </ul>
6 Amount (\$) \$3,071.31	7 Payee address; City; State; Zip Code P.O. Box 40354
Expenditure from corporate funds	Houston, TX 77240
8 PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Fees</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Various admin. services including storage fees, website fees, postal mailbox fees, food &amp; beverage</li> </ul> </li> </ul>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

The Instruction Guide explains how to complete this form.				ages Schedule K: ./4 Rpt: 14/17			
2 FILER NAME 3 File			Filer ID	O (Ethics Commission	Filers)		
Assoc	Association of Retired Houston Municipal Employees PAC 00070					183	
4 Date		5	Name of person from whom amount is received			8 Amount (\$)	
07/12	2/2024		Priority Trust Credit Union				\$82.49
		6	Address of person from whom amount is received; City; State; Zip Code				
			Houston, TX 77075				
		7	Purpose for which amount is received	if politi	cal conti	ribution returned to filer	
Date			Name of person from whom amount is received			Amount (\$)	
07/30	0/2024		Priority Trust Credit Union				\$70.45
			Address of person from whom amount is received; City; State; Zip Code			1	
			Houston, TX 77075				
				if politi	cal conti	l ribution returned to filer	
Date			Name of person from whom amount is received			Amount (\$)	
07/31	1/2024		Priority Trust Credit Union				\$0.88
			Address of person from whom amount is received; City; State; Zip Code				
			Houston, TX 77075				
		_	<u> </u>	if noliti	cal conti	l ribution returned to filer	
				" P	000 000		
Date			Name of person from whom amount is received			Amount (\$)	
08/12	2/2024		Priority Trust Credit Union				\$87.76
			Address of person from whom amount is received; City; State; Zip Code			1	
			Houston, TX 77075				
				if politi	cal conti	I ribution returned to filer	
				ч р -			
Date			Name of person from whom amount is received			Amount (\$)	
08/30	0/2024		Priority Trust Credit Union				\$73.04
			Address of person from whom amount is received; City; State; Zip Code				
			Houston, TX 77075				
				if noliti	cal conti	hibution returned to filer	
				n pona	Cal Com		

The Instrue	1 Total pages Schedule K: Sch: 2/4 Rpt: 15/17				
2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Association	Association of Retired Houston Municipal Employees PAC 00070				
4 Date	5 Name of person from whom amount is received	8 Amount (\$)			
08/31/2024	Priority Trust Credit Union	\$0.82			
	6 Address of person from whom amount is received; City; State; Zip Code				
	Houston, TX 77075				
		olitical contribution returned to filer			
Date	Name of person from whom amount is received	Amount (\$)			
09/12/2024	Priority Trust Credit Union	\$88.14			
	Address of person from whom amount is received; City; State; Zip Code				
	Houston, TX 77075	1911 Les mathematicas anti-um est to filos			
	Purpose for which amount is received Check if p	olitical contribution returned to filer			
Data	Name of person from whom amount is required	Amount (\$)			
Date 09/30/2024	Name of person from whom amount is received Priority Trust Credit Union	Amount (\$) \$73.29			
03/00/2024	Address of person from whom amount is received; City; State; Zip Code	φτο.20			
	Address of person from whom amount is received, only, state, 2p code				
	Houston, TX 77075				
	Purpose for which amount is received Check if p	olitical contribution returned to filer			
Date	Name of person from whom amount is received	Amount (\$)			
09/30/2024	Priority Trust Credit Union	\$0.79			
	Address of person from whom amount is received; City; State; Zip Code				
	Houston, TX 77075				
		olitical contribution returned to filer			
Date	Name of person from whom amount is received	Amount (\$)			
10/12/2024	Priority Trust Credit Union	\$85.66			
	Address of person from whom amount is received; City; State; Zip Code				
	Houston TV 7707E				
	Houston, TX 77075 Purpose for which amount is received Check if po	alitical contribution roturned to filer			
		olitical contribution returned to filer			

The Instruction Guide explains how to complete this form.				1		ages Schedule K: /4 Rpt: 16/17	
2 FILER NAME 3 Filer I			Filer ID	(Ethics Commission	Filers)		
	Association of Retired Houston Municipal Employees PAC 00070				183		
4	Date	5	Name of person from whom amount is received			8 Amount (\$)	
	10/30/2024		Priority Trust Credit Union				\$71.16
		6	Address of person from whom amount is received; City; State; Zip Code				
			Houston, TX 77075				
		7	Purpose for which amount is received	k if politi	cal contr	i bution returned to filer	
_	Date	Ē	Name of person from whom amount is received			Amount (\$)	
	10/31/2024		Priority Trust Credit Union				\$0.85
			Address of person from whom amount is received; City; State; Zip Code				
		L	Houston, TX 77075		· .	·····	
			Purpose for which amount is received Check	< if politi	cal contr	ibution returned to filer	
╞		Ļ					
	Date 11/15/2024		Name of person from whom amount is received			Amount (\$)	\$69.68
	11/15/2024	ļ	Priority Trust Credit Union				<i>Ф</i> 0 <u></u> 9.00
			Address of person from whom amount is received; City; State; Zip Code				
		_	Houston, TX 77075				
			Purpose for which amount is received	k if politi	cal contr	ibution returned to filer	
	Date		Name of person from whom amount is received			Amount (\$)	
	11/30/2024		Priority Trust Credit Union				\$73.78
			Address of person from whom amount is received; City; State; Zip Code				
			Houston, TX 77075				
				k if noliti	cal contr	l ibution returned to filer	
				( ii pene	our oc		
⊨	Date	$\vdash$	Name of person from whom amount is received			Amount (\$)	
	11/30/2024		Priority Trust Credit Union			, unoc (+)	\$0.86
			Address of person from whom amount is received; City; State; Zip Code				
		L	Houston, TX 77075				
			Purpose for which amount is received	k if politi	cal contr	ibution returned to filer	

	The Instruction Guide explains how to complete this form.			bages Schedule K: 4/4 Rpt: 17/17			
2	FILER NAME 3 Filer ID			D (Ethics Commission	Filers)		
	Association of Retired Houston Municipal Employees PAC				00070	)183	
4	Date	5	Name of person from whom amount is received			8 Amount (\$)	
	12/15/2024		Priority Trust Credit Union				\$67.66
		6	Address of person from whom amount is received; City; State; Zip Code				
			Houston, TX 77075				
		7	Purpose for which amount is received	if politi	cal cont	ribution returned to filer	
	Date		Name of person from whom amount is received			Amount (\$)	
	12/30/2024		Priority Trust Credit Union				\$71.63
			Address of person from whom amount is received; City; State; Zip Code				
			Houston, TX 77075				
			Purpose for which amount is received	if politi	cal cont	ribution returned to filer	
	Date		Name of person from whom amount is received			Amount (\$)	
	12/31/2024		Priority Trust Credit Union				\$0.91
			Address of person from whom amount is received; City; State; Zip Code				
			Houston, TX 77075				
			Purpose for which amount is received Check	if politi	cal cont	ribution returned to filer	