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) 00066105 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Latino Conservatives PAC Date Received **ELECTRONICALLY FILED** 02/04/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P. O. Box 130853 Change of Address Houston, TX 77219-0853 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Mr. Hector G. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Longoria CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE TREASURER 642 Heights Blvd. STREET **ADDRESS** (Residence or Business) Houston, TX 77007 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 642 Heights. Blvd. MAILING **ADDRESS** Change of Address Houston, TX 77007 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 561-3334 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** 12/26/2024 01/25/2025

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

| | | | - | | |
|---|--|--|--|--------------------------|---|
| 2 COMMITTEE NAME 13 File | | | | | (Ethics Commission Filers) |
| Texas Latino Conser | vatives PAC | | 00 | 066105 | |
| 4 COMMITTEE ACTIVITY | 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.) | ул Сарронов | | | |
| | | B. Opposed | | | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | | |
| F CONTRIBUTION | 111 1 2 21 27 | POLITICAL CONTRIBUTION | IO (OTLIED TURN) | _ | |
| .5 CONTRIBUTION TOTALS | TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) check here if this report qualifies for the higher itemization threshold | | | \$ | 0.00 |
| | 2. TOTAL POLITICA | | | \$ | 0.00 |
| | (OTHER THAN PLE | DGES, LOANS, OR GUARANT | TEES OF LOANS) | | 0.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZEI | D POLITICAL EXPENDITURES | 5 | \$ | 0.00 |
| | 4. TOTAL POLITICA | L EXPENDITURES | | \$ | 0.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | | | \$ | 1,356.86 |
| OUTSTANDING LOAN TOTALS | | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | | | 0.00 |
| 6 AFFIDAVIT | | | | <u> </u> | |
| | | l swear, or affirm true and correct under Title 15, E | n, under penalty of perjury, and includes all information Election Code. | that the a n required | accompanying report is If to be reported by me |
| | | | Mr. Hector G. L | ongoria | |
| | | | Signature of Campaig | | rer |
| AFFIX NOTA | RY STAMP / SEAL ABOVE | | | , | |
| | | | | | |
| | | which witness my hand and so | | 9 | day |
| 01 | , 20, to certify | which, witness my hand and se | ан от опісе. | | |
| Signature of officer | administering oath | Printed name of officer adminis | stering oath Ti | tle of offic | er administering oath |
| g 5. 5.7001 | | | · g · | | |

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

| | | | | 3 of 4 |
|------------------|---|--|-----------------------------|----------------------------|
| 17 COMM Texas | | EE NAME ino Conservatives PAC | 18 Filer ID 00066105 | (Ethics Commission Filers) |
| 19 SCHEI | | SUBTOTAL AMOUNT | | |
| 1. | | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ |
| 2. | | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ |
| 3. | | \$ | | |
| 4. | | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION | R | \$ |
| 5. | | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION | TION OR | \$ |
| 6. | | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA | ANIZATION | \$ |
| 7. | | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | | \$ |
| 8. | | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C | ORGANIZATION | \$ |
| 9. | | SCHEDULE E: LOANS | | \$ |
| 10. | | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | 5 | \$ |
| 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 | DNS | \$ 25.00 |
| 15. | | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER | RETURNED | \$ |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

| | MADE FROM F | POLITICAL CONTRIBUTIONS |
|---|--|---|
| | | The Instruction Guide explains how to complete this form. |
| 1 | Total pages Schedule I: Sch: 1/1 Rpt: 4/4 | 2 FILER NAME Texas Latino Conservatives PAC 3 Filer ID (Ethics Commission Filers) 00066105 |
| 4 | Date 12/31/2024 | 5 Payee name Frost Bank |
| 6 | Amount (\$) 10.00 Expenditure from corporate funds | 7 Payee Address; City; State; Zip 1700 Post Oak Blvd Suite 120 Houston, TX 77056 |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees (b) Description Service fee |
| | Date | Payee name |
| | 12/30/2024 | Melio |
| | Amount (\$) 15.00 Expenditure from corporate funds | Payee Address; City; State; Zip 124 E 14th St New York, NY 10003 |
| | PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees (b) Description Service fee |
| | | , , |