MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

The MPAC Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00028329	2 Total pages filed: 5
3 COMMITTEE NAME			OFFICE USE ONLY
Associated Builde	rs & Contractors of Texas PAC		Date Received
			ELECTRONICALLY FILED
			04/07/2025
4 COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP	-
ADDRESS	PO Box 1891		
	Austin, TX 78767		Date Hand-delivered or Date Postmarked
5 CAMPAIGN TREASURER	MS / MRS / MR FIRST	MI	
NAME	Craig D.		Receipt # Amount
			Date Processed
	NICKNAME LAST	SUFFI	
	Messer		Date Imaged
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE)	; APT / SUITE #; CITY; S1	ATE; ZIP CODE
STREET	PO Box 1891		
ADDRESS (Residence or Business)			
(···· ··· ··· ··· ··· ··· ··· ··· ···	Austin, TX 78737		
7 CAMPAIGN TREASURER	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; S	TATE; ZIP CODE
MAILING	PO Box 1891		
ADDRESS			
	Austin, TX 78701		
8 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	EXTENSION	
PHONE	(737) 443-3441		
9 REPORT TYPE			
9 REPORTITE	X Monthly	10th day after campaign treasurer termination	Dissolution (Attach PAC-DR)
10 MONTHLY			
REPORT FILING	January 5 X Apri	l 5 🛛 🗌 July 5	October 5
DEADLINE	February 5 May	August 5	November 5
	March 5 Jun	e 5 September 5	December 5
11 PERIOD	Month Day Year	Month	Day Year
COVERED	02/26/2025	THROUGH 03/25/	2025
	GO	TO PAGE 2	
Forms provided by Te	xas Ethics Commission www.e	thics.state.tx.us	Version V4.1.0.e02d6221

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

			13 Filer ID	(Ethics Commission Filers)
		-	00028329	
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 THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA	·	\$	1,500.00
EXPENDITURE TOTALS	`	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	60.30
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		DAY \$	30,735.86
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.	rjury, that the a mation require	accompanying report is d to be reported by me
		Craig D	. Messer	
		Signature of Ca		Irer
		, and the second s		
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
		, ti	his the	day
of	_, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of offic	cer administering oath
Forms provided by Texas	Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.e02d6221

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

3 of 5

17 COMMITT		18 Filer ID	(Ethics Commission Eilers)
Associate	d Builders & Contractors of Texas PAC	00028329	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			\$ 1,500.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$	
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			\$
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 CONTRIBUTIONS		\$ 60.30	
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		\$	
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 **1** Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/5 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Associated Builders & Contractors of Texas PAC 00028329 4 Date 5 Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 7 03/05/2025 \$1,500.00 Medlin, Curtis 6 Contributor address; City; State; Zip Code Spring Branch , TX 78070 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Vice President Joeris General Contractors

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	payment/Reimbursement Solicitation/Fundraising Expense verhead/Rental Expense Transportation Equipment & Related Expense xpense Travel in District Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 5/5	Associated Builders & Contractors of Texas P.	
4 Date	5 Payee name	I
03/05/2025	Anedot	
6 Amount (\$) \$60.30	 Payee address; City; State; Zip C 1340 Poydras St #1770 New Orleans, LA 70112 	ode
		1
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Transaction Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sol	ught Office held