CORRECTION/AMENDMENT AFFIDAVIT FORM COR-PAC FOR POLITICAL COMMITTEE Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00038187 Date Received COMMITTEE Texas Economic Development PAC **ELECTRONICALLY FILED** NAME 04/29/2025 TREASURER Schwab, Carlton R. (Mr.) NAME Date Hand-delivered or Date Postmarked **ORIGINAL** January 15 Runoff REPORT TYPE Receipt # Amount July 15 10th day after campaign treasurer resignation 30th day before election Dissolution report Date Processed 8th day before election Other (specify) ORIGINAL PERIOD Month Year Day Year Day Month Date Imaged **COVERED THROUGH** 07/01/2024 09/30/2024 **EXPLANATION OF CORRECTION** Checks that were written where never handed out and have since been voided. 8 AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. Mr. Carlton R. Schwab Signature of Campaign Treasurer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said ____, this the ____ _____, 20_____, to certify which, witness my hand and seal of office. Title of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form **Needed To Report And Explain Corrections**

Printed name of officer administering oath

Signature of officer administering oath

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) 00038187 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Economic Development PAC Date Received **ELECTRONICALLY FILED** 04/29/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 919 Congress Avenue Date Hand-delivered or Date Postmarked **Suite 1145** Austin, TX 78701 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Carlton R. NAME NICKNAME LAST **SUFFIX** Schwab STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 919 Congress Avenue STREET **ADDRESS** Suite 1145 (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 480-8432 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) X **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 09/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

| 12 COMMITTEE NAME | | | 13 Filer ID | (Ethics Commission Filers) |
|---|--|---|-----------------|----------------------------|
| Texas Economic Dev | velopment PAC | | 00038187 | |
| 14 COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Daniel Alders State Represent | tative | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | |
| | 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 N | D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold | \$ | 0.00 |
| | | AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 2,520.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZE | D POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICA | AL EXPENDITURES | \$ | 8,000.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL OF THE REPORTIN | CONTRIBUTIONS MAINTAINED AS OF THE LAST IG PERIOD | DAY \$ | 58,837.84 |
| OUTSTANDING LOAN TOTALS | | AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD | THE \$ | 0.00 |
| 16 AFFIDAVIT | | | <u> </u> | |
| | | I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code. | | |
| | | Mr. Carlton | ı R. Schwab | |
| | | Signature of Ca | | <u> </u> |
| AFFIX NOTA | RY STAMP / SEAL ABOVE | G . | | |
| Sworn to and subscrib | ped before me, by the said | , th | nis 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 office | er administering oath |

FORM GPAC ADDENDUM

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| OMMITTEE NAME exas Economic Develor OMMITTEE CTIVITY attach lists on plain aper to complete this port if necessary.) | Candidates (Identify by name or, if applicable, classify by party.) | | Rep. Angie Button State Repre | 13 Filer ID 00038187 sentative | (Ethics Commission Filers) |
|--|--|---|--|---|---|
| OMMITTEE CTIVITY attach lists on plain aper to complete this | Candidates (Identify by name or, if applicable, classify by party.) | | Rep. Angie Button State Repre | | |
| CTIVITY attach lists on plain aper to complete this | (Identify by name or, if applicable, classify by party.) | | Rep. Angie Button State Repre | sentative | |
| aper to complete this | | 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.) | | | | |
| OMMITTEE CTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | Rep. Dade Phelan State Repre | sentative | |
| attach lists on plain aper to complete this port 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.) | | | | |
| OMMITTEE CTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | Rep. Greg Bonnen State Repre | esentative | |
| attach lists on plain aper to complete this port 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.) | | | | |
| | ETIVITY ttach lists on plain per to complete this port if necessary.) DIMMITTEE ETIVITY ttach lists on plain per to complete this | applicable, classify by party.) DMMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) DMMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | applicable, classify by party.) DMMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) DMMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) EXECUTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) EXECUTIVITY 2. Measures (Identify by name or, if applicable, classify by party.) EXECUTIVITY 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted A. Supported B. Opposed B. Opposed 3. Officeholders Assisted | applicable, classify by party.) DMMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) DMMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed | applicable, classify by party.) 1. Candidates (dantify by name or, if applicable, classify by party.) 1. Candidates (dantify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location or election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location or election and nature of issue.) 3. Officeholders (Identify by name or, if applicable, classify by party.) 3. Candidates (Identify by name or, if applicable, classify by party.) 4. Supported Rep. Greg Bonnen State Representative (Identify by name or, if applicable, classify by party.) 5. Measures (Describe by date and location or election and nature of issue.) 6. Opposed 7. Measures (Describe by date and location or election and nature of issue.) 8. Opposed 8. Opposed 8. Opposed 8. Opposed 9. Opposed 9. Opposed 1. Candidates (Identify by name or, if applicable, classify by party.) 8. Opposed 9. Opposed |

FORM GPAC ADDENDUM

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|---|---|--------------|------------------------------|--------------|----------------------------|
| 12 COMMITTEE NAME | | | | 13 Filer ID | (Ethics Commission Filers) |
| Texas Economic Developm | nent PAC | | | 00038187 | |
| | Candidates | Λ Supported | Rep. Dustin Burrows State Re | procentative | |
| ACTIVITY | entify by name or, if plicable, classify by party.) | A. Supported | Rep. Dustin Burrows State Re | presentative | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| 2. | Measures | A. Supported | | | |
| loca | escribe by date and ation of election and ture of issue.) | | | | |
| | | B. Opposed | | | |
| (Ide | Officeholders Assisted entify by name or, if plicable, classify by party.) | | | | |
| | | A Cupranta- | Dan Obaniia Carra Otat D | | |
| A CTIV (ITV | Candidates entify by name or, if | A. Supported | Rep. Charlie Geren State Rep | resentative | |
| арр | plicable, classify by party.) | | | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| 2. | Measures | A. Supported | | | |
| loca | escribe by date and ation of election and ture of issue.) | | | | |
| | | B. Opposed | | | |
| | Officeholders Assisted | | | | |
| | entify by name or, if plicable, classify by party.) | | | | |
| ACTIVITY | Candidates entify by name or, if plicable, classify by party.) | A. Supported | Mr. Solomon Ortiz State Repr | esentative | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| 2. | Measures | A. Supported | | | |
| loca | escribe by date and ation of election and ture of issue.) | | | | |
| | | B. Opposed | | | |
| 3. | Officeholders Assisted | | | | |
| | entify by name or, if plicable, classify by party.) | | | | |
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FORM GPAC ADDENDUM

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|---|--|--------------|--------------------------------|-------------|----------------------------|
| 12 COMMITTEE NAME | | | | 13 Filer ID | (Ethics Commission Filers) |
| Texas Economic Develo | pment PAC | | | 00038187 | |
| 14 COMMITTEE | 1. Candidates | A. Supported | Rep. Harris Davila State Repre | sentative | |
| 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 | | | |
| | Officeholders Assisted | | | | |
| | (Identify by name or, if applicable, classify by party.) | | | | |
| COMMITTEE | 1. Candidates | A. Supported | Rep. Mihaela Plesa State Repr | esentative | |
| 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 | | | |
| | Officeholders Assisted | | | | |
| | (Identify by name or, if applicable, classify by party.) | | | | |
| COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | | Rep. Eddie Morales State Rep. | resentative | |
| (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 | | | |
| | Officeholders Assisted | | | | |
| | (Identify by name or, if applicable, classify by party.) | | | | |
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|----|---|--|--------------|-------------------------------|-----------------|----------------------------|
| 12 | COMMITTEE NAME | | | | 13 Filer ID | (Ethics Commission Filers) |
| | Texas Economic Develo | opment PAC | | | 00038187 | |
| 14 | COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | Rep. Morgan Meyer State Repre | L esentative | |
| | (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.) | | | | |
| | COMMITTEE | 1. Candidates | A. Supported | Rep. John Lujan State Represe | ntative | |
| | 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 (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.) | | | | |
| | COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | Sen. Morgan LaMantia State Se | enator | |
| | (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.) | | | | |
| | | 1 | <u> </u> | | | |

FORM GPAC ADDENDUM

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|----|---|--|--------------|-------------------------------|---------------|----------------------------|
| 12 | COMMITTEE NAME | | | | 13 Filer ID | (Ethics Commission Filers) |
| | Texas Economic Develo | pment PAC | | | 00038187 | |
| 14 | COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | | Rep. John McQueeney State R | epresentative | |
| | (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.) | | | | |
| | COMMITTEE | 1. Candidates | A. Supported | Cassandra Hernandez State Re | epresentative | |
| | ACTIVITY | (Identify by name or, if applicable, classify by party.) | | | op:000:aa | |
| | (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.) | | | | |
| | COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | Mr. Paul Dyson State Represer | ntative | |
| | (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.) | | | | |
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FORM GPAC ADDENDUM

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|--------------------------------|---|---|--------------|-------------------------|-------------|---------------|----------------------------|
| 12 COMMIT | TTEE NAME | | | | | 13 Filer ID | (Ethics Commission Filers) |
| Texas Economic Development PAC | | | | | | 00038187 | |
| 14 COMMIT ACTIVIT | | Candidates (Identify by name or, if applicable, classify by party.) | | Mr. Matt Morgan Stat | te Represer | ntative | |
| paper to | ists on plain complete this 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.) | | | | | |
| COMMIT | ΓTFF | 1. Candidates | A. Supported | Hilary Hickland State | Renresent | ative | |
| ACTIVIT | | (Identify by name or, if applicable, classify by party.) | | Tilidiy Filoniana State | . represent | auve | |
| paper to | ists on plain complete this 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.) | | | | | |
| COMMIT | | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | Mrs. Keresa Ricahrds | son State R | epresentative | |
| paper to | ists on plain complete this 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.) | | | | | |
| | | | | | | | |

FORM GPAC ADDENDUM

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| 12 | COMMITTEE NAME | | | | 13 Filer ID | (Ethics Commission Filers) |
|----|---|--|----------------|----------------------------|---------------|----------------------------|
| | Texas Economic Develo | opment PAC | | | 00038187 | |
| | COMMITTEE ACTIVITY | Candidates (Identify by name or, if | A. Supported | Mr. Jeffrey Barry State Re | epresentative | |
| | | 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.) | 7 ti Gapportoa | | | |
| | | | B. Opposed | | | |
| | | 3. Officeholders Assisted | | | | |
| | | (Identify by name or, if applicable, classify by party.) | | | | |
| | COMMITTEE | 1. Candidates | A. Supported | Mr. Patrick Curry State Re | presentative | |
| | ACTIVITY | (Identify by name or, if applicable, classify by party.) | | | | |
| | (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | | |
| | | Measures (Describe by date and | A. Supported | | | |
| | | location of election and nature of issue.) | | | | |
| | | | B. Opposed | | | |
| | | Officeholders Assisted | | | | |
| | | (Identify by name or, if applicable, classify by party.) | | | | |
| | COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | | Mr. Vicente Perez State R | epresentative | |
| | (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 | | | |
| | | Officeholders Assisted | | | | |
| | | (Identify by name or, if applicable, classify by party.) | | | | |
| | | | | | | |

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|---|---------------------|----------------------------------|--------------|----------------------------|
| 12 COMMITTEE NAME | | | 13 Filer ID | (Ethics Commission Filers) |
| Texas Economic Development P | AC | | 00038187 | |
| 14 COMMITTEE 1. Candi (Identify by rapplicable, c | | Caroline Fairly State Representa | ative | |
| (Attach lists on plain paper to complete this report if necessary.) | B. Opposed | | | |
| 2. Measi (Describe by location of e nature of iss | date and ection and | I | | |
| naure or iss | B. Opposed | | | |
| 3. Office Assist (Identify by rapplicable, c | ed | | | |
| COMMITTEE 1. Candi | dates A. Supported | Mrs. Lauren Simmons State Rep | oresentative | |
| ACTIVITY (Identify by rapplicable, c | | · | | |
| (Attach lists on plain paper to complete this report if necessary.) | B. Opposed | | | |
| 2. Measi (Describe by location of enature of iss | date and ection and | i | | |
| | B. Opposed | | | |
| 3. Office Assist (Identify by r | ed | | | |
| COMMITTEE 1. Candi ACTIVITY (Identify by r | dates A. Supported | d Rep. Stan Lambert State Repres | sentative | |
| (Attach lists on plain paper to complete this report if necessary.) | B. Opposed | | | |
| 2. Meast (Describe by location of e nature of iss | date and ection and | i | | |
| | B. Opposed | | | |
| 3. Office Assist (Identify by r applicable, c | ed | | | |
| 1 | I | | | |

GENERAL-PURPOSE COMMITTEE REPORT:

FORM GPAC ADDENDUM

| PURPUSE | | | | Page 12 of 26 |
|---|--|-----------------------------------|--------------------|----------------------------|
| COMMITTEE NAME | | | 13 Filer ID | (Ethics Commission Filers) |
| Texas Economic Devel | opment PAC | | 00038187 | |
| COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported Rep. Stan Gerdes Sta | ate Representative | |
| (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.) | | | |
| | | | | |
| | | | | |

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

| | | | | _ | 13 of 26 |
|---------------|--|--|-----------------------------|--------------------|-----------|
| l | | EE NAME onomic Development PAC | 18 Filer ID 00038187 | (Ethics Commission | n Filers) |
| 19 SCI | | CURTOTAL A | MOUNT | | |
| NAI | ME OF | SUBTOTAL A | MOUNT | | |
| 1. | 1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | | | 2,520.00 |
| 2. | | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | |
| 3. | | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ | |
| 4. | | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION | R | \$ | |
| 5. | | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR 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 CONTRIBUTIONS | S | \$ | 8,000.00 |
| 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 | DNS | \$ | 500.00 |
| 15. | | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER | RETURNED | \$ | |
| | | | | | |
| | | | | | |
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| | MONEI | ARY POLITICAL C | SCHEDULE A1 | | | |
|--|--|---|------------------------------------|---------------------------------------|---|--|
| | The Instruc | ction Guide explains how t | to complete this fo | orm. | 1 Total pages Schedule A1: Sch: 1/9 Rpt: 14/26 | |
| 2 | FILER NAME Toyon Foundament DAC | | | | 3 Filer ID (Ethics Commission Filers) | |
| | | conomic Development PAC | | | 00038187 | |
| 4 | Date 08/01/2024 5 Full name of contributor out-of-state PAC (ID#:) Attaway, James 6 Contributor address; City; State; Zip Code | |) | 7 Amount of Contribution (\$) \$100.0 | | |
| _ | | Quitman, TX 75783 | 1 | | | |
| 8 | | pation / Job title (See Instructions) | 1 | 9 Employer (See Instructions | | |
| | City Adminis | trator and Executive Director | | Quitman Development | · | |
| | Date Full name of contributor out-of-state PAC (ID#:) O8/01/2024 Attaway, James Contributor address; City; State; Zip Code | | Amount of Contribution (\$) \$20.0 | | | |
| | | Quitman, TX 75783 | | | | |
| | Principal occupation / Job title (See Instructions) Employer (See Instruction | | | | | |
| | City Adminis | trator and Executive Director | | Quitman Development | Corporation | |
| Date Full name of contributor out-of-state PAC (I 08/01/2024 Balderas, Justin Contributor address; City; State; Zip Code | | out-of-state PAC (ID#: | | Amount of Contribution (\$) | | |
| | | Levelland, TX 79336 | | | | |
| | Principal occu Economic De | pation / Job title (See Instructions) | | Employer (See Instructions | I IS) | |
| | Date 08/01/2024 | Full name of contributor Bingham, Casey Contributor address; City; Stat | out-of-state PAC (ID#: | | Amount of Contribution (\$) | |
| | Principal occu Economic De | pation / Job title (See Instructions) eveloper | | Employer (See Instructions | is) | |
| | Date 08/01/2024 | Full name of contributor Blake, Shannon Contributor address; City; State Sherman, TX 75090 | out-of-state PAC (ID#: | | Amount of Contribution (\$) | |
| | Principal occu Economic De | pation / Job title (See Instructions) eveloper | | Employer (See Instructions | is) | |
| | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | SCHEDULE A1 | | | |
|---|--|--|--|-----------------------------|---|-----------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 2/9 Rpt: 15/26 | |
| 2 | FILER NAME Texas Econo | omic Development PAC | | 3 | Filer ID (Ethics Commission 00038187 | n Filers) |
| 4 | Date 08/01/2024 5 Full name of contributor out-of-state PAC (ID#:) Crenshaw, Sherry 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$50.00 | |
| _ | Driverinal | Dallas, TX 75202 | O Frankright (Cook hostworthogo | | | |
| 8 | Economic D | pation / Job title (See Instructions) eveloper | 9 Employer (See Instructions) |) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 08/01/2024 Fletcher, Christian Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$50.00 | |
| | Marble Falls, TX 78654 Principal occupation / Job title (See Instructions) Economic Developer Employer (See Instructions) | | Employer (See Instructions |) | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Ford, Jason Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$100.00 |
| | | Frisco, TX 75034 | | | | |
| | Principal occu President | pation / Job title (See Instructions) | Employer (See Instructions) Frisco EDC |) | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Foss, Nathan Contributor address; City; State; Zip Code Boise, ID 83709 |) | | Amount of Contribution (\$) | \$50.00 |
| | • | ncipal occupation / Job title (See Instructions) Employer (See Instruction Employer (See Instru | |) | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_Gannb, Tammy Contributor address; City; State; Zip Code Huntsville, TX 77340 | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu Economic De | pation / Job title (See Instructions) eveloper | Employer (See Instructions |) | | |
| | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | |
|---|--|---|---|-----------------------------|---|-----------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 3/9 Rpt: 16/26 | |
| 2 | FILER NAME Texas Econo | omic Development PAC | | 3 | Filer ID (Ethics Commission 00038187 | n Filers) |
| 4 | | | 7 | Amount of Contribution (\$) | \$100.00 | |
| 0 | Principal occu | Edinburg, TX 78539 upation / Job title (See Instructions) | 9 Employer (See Instructions | | | |
| 8 | Executive Di | | Edinburg EDC |) | | |
| | Date 08/01/2024 | 8/01/2024 Gell, Giselle Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Austin, TX 78701 upation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Economic Developmer Opportunity Austin | | | | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Gibson, Jim Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$20.00 |
| | | Rockdale, TX 76567 | | | | |
| | Principal occu Economic De | pation / Job title (See Instructions) eveloper | Employer (See Instructions |) | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Gill, Susan Contributor address; City; State; Zip Code Lindale, TX 75771 | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu Economic De | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_Greiner, Jason Contributor address; City; State; Zip Code Wylie, TX 75098 | | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Executive Di | ipation / Job title (See Instructions) irector | Employer (See Instructions Wylie EDC |) | | |
| | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | SCHEDULE A1 | | | | |
|---|--|--|---|--|----------|--------------------------------------|-----------|
| The Instruction Guide explains how to complete this form. | | 1 | Total pages Schedule A1: Sch: 4/9 Rpt: 17/26 | | | | |
| 2 | FILER NAME Texas Econo | omic Development PAC | | | 3 | Filer ID (Ethics Commission 00038187 | n Filers) |
| 4 | | | 7 | Amount of Contribution (\$) | \$100.00 | | |
| _ | Deinsinal | Killeen, TX 76540 | T _o | Faradaya (Osadaya tisasa | <u> </u> | | |
| 8 | Economic De | pation / Job title (See Instructions) | 9 | Employer (See Instructions Greater Killeen Chambe | | Commerce | |
| | Date 08/01/2024 | Full name of contributor Hargrove, John Contributor address; City; Stat | out-of-state PAC (ID#: te; Zip Code |) | | Amount of Contribution (\$) | \$100.00 |
| | | Buna, TX 77612 | | | | | |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | anyolonmont LLC | | | |
| | Economic Developer Buna Regional Econom | | IIC L | | | | |
| | Date 08/01/2024 | Full name of contributor Holzbog, Kevin Contributor address; City; Stat | out-of-state PAC (ID#: te; Zip Code |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu | Decatur, TX 76234 pation / Job title (See Instructions) | | Employer (See Instructions | -, | | |
| | Economic De | | | Decatur Economic Deve | | ment Corporation | |
| | Date 08/01/2024 | Full name of contributor [Holzbog, Kevin Contributor address; City; State Decatur, TX 76234 | out-of-state PAC (ID#: te; Zip Code |) | | Amount of Contribution (\$) | \$20.00 |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | Economic Developer Decatur Economic Deve | | elop | ment Corporation | | | |
| | Date 07/10/2024 | Full name of contributor Jamison, Pat Contributor address; City; Stat Benbrook, TX 76126 | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$100.00 |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| _ | Economic De | eveloper | | | | | |
| | | | | | | | |

| | MONEI | MONETARY POLITICAL CONTRIBUTIONS | | SCHEDULE | | | |
|---|--|--|---|------------------------------|---|-----------------------------|-----------|
| The Instruction Guide explains how to complete this form. | | 1 | Total pages Schedule A1: Sch: 5/9 Rpt: 18/26 | | | | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | | omic Development PAC | | | | 00038187 | |
| 4 | Date 08/01/2024 | | | 7 | Amount of Contribution (\$) | \$50.00 | |
| | | San Antonio, TX 78205 | | | | | |
| 8 | | pation / Job title (See Instructions) | | 9 Employer (See Instructions | () | | |
| | Economic De | eveloper | | | | | |
| | Date | – | of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 08/01/2024 | Jones, Tracy | | | | | \$100.00 |
| | | Contributor address; City; State; Zip | Code | | | | |
| | | | | | | | |
| | | Odessa, TX 79760 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | Director, Business Retention Expansion Odessa Development C | | | oration | | | |
| | Date | Full name of contributor out- | of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 08/01/2024 | | | | | (+) | \$50.00 |
| | | Contributor address; City; State; Zip Code | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Odessa, TX 79760 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | | | |
| | Director, Bus | siness Retention Expansion | | Odessa Development C | orp | oration | |
| | Date | _ | of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 08/01/2024 | Mayo, Misty | | | | | \$50.00 |
| | | Contributor address; City; State; Zip | Code | | | | |
| | | | | | | | |
| | | Abilene, TX 79601 | | | | | |
| | Principal occu | L pation / Job title (See Instructions) | | Employer (See Instructions | <u>. </u> | | |
| | Economic De | eveloper | | | | | |
| | Date | Full name of contributor out- | of-state PAC (ID#: |) | | Amount of Contribution (\$) | |
| | 08/01/2024 | Mazarakes, Charles | | | | | \$100.00 |
| | | Contributor address; City; State; Zip | Code | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Rowlett, TX 75089 | - | | _ | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | () | | |
| | Economic De | evelopment Specialist | | City of Rowlett | | | |
| | | | | | | | |
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| | MONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | |
|----------|---|--|------------------------------|-----------------------------|---|-----------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 6/9 Rpt: 19/26 | |
| 2 | FILER NAME Texas Econo | omic Development PAC | | 3 | Filer ID (Ethics Commission 00038187 | n Filers) |
| 4 | Date 08/01/2024 5 Full name of contributor out-of-state PAC (ID#:) McGregor, Stewart 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$20.00 | |
| 8 | Principal occu | Kaufman, TX 75142 upation / Job title (See Instructions) | 9 Employer (See Instructions |) | | |
| <u> </u> | Economic D | | S Employer (See Instructions |) | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Morgan, Joanna (Mrs.) Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | Smithville, TX 78957 upation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Board Treasurer Smithville Workforce Tr | | | ng Center | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Muller, Amy Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$50.00 |
| | | Terrell, TX 75160 | | | | |
| | Principal occu Economic D | pation / Job title (See Instructions) eveloper | Employer (See Instructions |) | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Newman, Joe Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | Ennis, TX 75119 upation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Economic D | | , ,, , | | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Nobles, Amanda Contributor address; City; State; Zip Code Kilgore, TX 75662 |) | | Amount of Contribution (\$) | \$100.00 |
| | Principal occu Economic D | ipation / Job title (See Instructions) eveloper | Employer (See Instructions |) | | |
| | | | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | NS | | SCHEDULE A1 | | |
|----------------------------------|--|--|--------------|--|-----------------------------|---|-----------|
| | The Instru | ction Guide explains how to comple | ete this for | m. | 1 | Total pages Schedule A1: Sch: 7/9 Rpt: 20/26 | |
| 2 | FILER NAME Texas Econo | omic Development PAC | | | 3 | Filer ID (Ethics Commission 00038187 | n Filers) |
| 4 | 4 Date 08/01/2024 5 Full name of contributor out-of-state PAC (ID#:) Reynolds, Nikala 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$20.00 | | |
| _ | | Kingsville, TX 78363 | 1- | | <u> </u> | | |
| 8 | Principal occu Economic De | pation / Job title (See Instructions) eveloper | 9 | Employer (See Instructions | s) | | |
| | Date 08/01/2024 | Robertson, Dale | |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | Austin, TX 78701 pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | VP of Business Development TEDCorp | | P) | | | | |
| | Date 08/01/2024 | Full name of contributor out-of-state Rowley, Carolyn Contributor address; City; State; Zip Code | e PAC (ID#: |) | • | Amount of Contribution (\$) | \$50.00 |
| | | Lubbock, TX 79401 | | | | | |
| | Principal occu Economic De | pation / Job title (See Instructions) eveloper | | Employer (See Instructions | 5) | | |
| | Date 08/01/2024 | Runnels, Matt | |) | • | Amount of Contribution (\$) | \$100.00 |
| | Principal occupation / Job title (See Instructions) Business Development Director Employer (See Instruction Decatur Economic Dev | | | oment Corporation | | | |
| | Date 08/01/2024 | | | • | Amount of Contribution (\$) | \$20.00 | |
| | | pation / Job title (See Instructions) velopment Director | | Employer (See Instructions Decatur Economic Deve | | nment Corporation | |
| | Dusiness De | velopinent birector | | Decatur Economic Deve | -10k | ment Corporation | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | SCHEDULE A1 | | |
|---|--|--|--|-----------------------------|---|---------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 8/9 Rpt: 21/26 | |
| 2 | FILER NAME Texas Econo | omic Development PAC | | 3 | Filer ID (Ethics Commission 00038187 | Filers) |
| 4 | Date 5 Full name of contributor out-of-state PAC (ID#:) Sharp, Kent 6 Contributor address; City; State; Zip Code | | 7 | Amount of Contribution (\$) | \$50.00 | |
| | | Sherman, TX 75090 | | | | |
| 8 | Principal occu Economic De | pation / Job title (See Instructions) eveloper | 9 Employer (See Instructions | 5) | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Stevens, Sean Contributor address; City; State; Zip Code |) | • | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | Coppers Cove, TX 76522 pation / Job title (See Instructions) | Employer (See Instructions | <u> </u> s) | | |
| | | | | Development Corporation | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Stokes, Terry Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$50.00 |
| | | Port Arthur, TX 77640 | | <u></u> | | |
| | Economic De | pation / Job title (See Instructions) eveloper | Employer (See Instructions | 5) | | |
| | Date 08/01/2024 | Full name of contributor out-of-state PAC (ID#:_ Thomas, Kristina Contributor address; City; State; Zip Code Loretto, TN 38469 | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occupation / Job title (See Instructions) Economic Developer Employer (See Instructions) Insyteful, LLC | | 5) | | | |
| | Date 08/01/2024 | | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu President | pation / Job title (See Instructions) | Employer (See Instructions Terrell Economic Develo | | ment Corporation | |
| | | | | | | |

| The Instruction Guide explains how to complete this form. 2 FILER NAME Texas Economic Development PAC | Total pages Schedule A1: Sch: 9/9 Rpt: 22/26 Filer ID (Ethics Commission Filers) 00038187 Amount of Contribution (\$) \$50.00 |
|--|--|
| Texas Economic Development PAC 4 Date | 00038187 Amount of Contribution (\$) |
| 4 Date 08/01/2024 5 Full name of contributor out-of-state PAC (ID#: | Amount of Contribution (\$) |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) | |
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| | |

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

| Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|---|---|
| 1 Total pages Schedule F1: | · · · · · · · · · · · · · · · · · · · |
| Sch: 1/3 Rpt: 23/26 | Texas Economic Development PAC 00038187 |
| 4 Date | 5 Payee name |
| 09/05/2024 | Button, Angie (Rep.) |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,500.00 | PO Box 832748 |
| Expenditure from corporate funds | Richardson, TX 78701 |
| 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. |
| | Candidate/Officeholder/Political Committee Campaign Contribution |
| | Campaign Contribution |
| O Commission Chill Military | Condidate/Officeholder name |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 09/11/2024 | Curry, Patrick |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$500.00 | 204 Woodhew Dr |
| | |
| Expenditure from corporate funds | Waco, TX 76712 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| 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 Campaign Contribution |
| | Campaign Continuation |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 09/11/2024 | Harris Davila, Caroline (Rep.) |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,000.00 | PO Box 2910 |
| | |
| Expenditure from corporate funds | Austin, TX 78768 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Contributions/Donations Made By Condidate (Office healder/Delities). Committee |
| | Candidate/Officeholder/Political Committee Campaign Contribution |
| | Campaign Continuation |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| | |
| | |
| | |

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services 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 | 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: 2/3 Rpt: 24/26 | Texas Economic Development PAC 00038187 |
| 4 Date | 5 Payee name |
| 09/11/2024 | LaMantia, Morgan (Sen.) |
| 6 Amount (\$) \$1,000.00 | 7 Payee address; City; State; Zip Code PO Box 12068 |
| Expenditure from corporate funds | Austin, TX 78711 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Contributions/Donations Made By |
| ZA ZHBITORZ | Candidate/Officeholder/Political Committee |
| | Campaign Contribution |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 09/11/2024 | Lujaun, John (Rep.) |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,000.00 | PO Box 2910 |
| Expenditure from corporate funds | Austin, TX 78768 |
| 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 |
| | Campaign Contribution |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experientare to benefit 6/61 | |
| Date | Payee name |
| 09/11/2024 | Meyer, Morgan (Rep.) |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,500.00 | PO Box |
| Expenditure from corporate funds | Austin, TX 78768 |
| 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. |
| | Candidate/Officeholder/Political Committee |
| | Campaign Contribution |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | y |
| | |
| | |

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

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 | |
|--|--|
| • | The Instruction Guide explains how to complete this form. |
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 3/3 Rpt: 25/26 | Texas Economic Development PAC 00038187 |
| 4 Date | 5 Payee name |
| 09/11/2024 | Ortiz, Solomon |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$500.00 | PO Box 286 |
| φοσοίοσ | 1 0 DOX 200 |
| Expenditure from | On white TV 70400 |
| corporate funds | Corpus Christi, TX 78403 |
| 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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Campaign Contribution |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| Data | Para a sana |
| Date | Payee name |
| 09/11/2024 | Plesa, Mihaela (Rep.) |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,000.00 | PO Box 2910 |
| Expenditure from | |
| corporate funds | Austin, TX 78768 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Contributions/Donations Made By |
| L/W LINDINGINE | Candidate/Officeholder/Political Committee Candidate/Officeholder living expense |
| | Campaign Contribution |
| Operation ONLY if discont | Outside to Office health and a second to the |
| Complete <u>ONLY</u> if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
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| NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS SCHEDULE | | | | |
|--|---|--|---|--|
| | | The Instruction Guide explains how to complete this | form. | |
| 1 | Total pages Schedule I: Sch: 1/1 Rpt: | FILER NAME Texas Economic Development PAC | 3 Filer ID (Ethics Commission Filers) 00038187 | |
| 4 | Date 08/19/2024 | 5 Payee name Falcon, Joe | | |
| 6 | Amount (\$) 500.00 Expenditure from | 7 Payee Address; City; State; Zip 516 Nogales Ln | | |
| 8 | corporate funds PURPOSE OF EXPENDITURE | Austin, TX 78641 (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense (b) Description Sponsorship | See instructions regarding type of information required.) | |
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