#### 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) 00087479 3 COMMITTEE NAME **OFFICE USE ONLY BETTER SA PAC** Date Received **ELECTRONICALLY FILED** 05/30/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 3510 N St. Mary's, Ste. 300 Date Hand-delivered or Date Postmarked San Antonio, TX 78212 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Cabell NAME NICKNAME LAST **SUFFIX** Hobbs STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 14425 Falcon Head Blvd. STREET **ADDRESS** BLDG E-100 (Residence or Business) Austin, TX 78738 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 341027 MAILING **ADDRESS** Austin, TX 78734 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (702) 900-4467 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** 04/24/2025 05/28/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Other X Runoff 06/07/2025 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)
BETTER SA PAC	00087479
14 COMMITTEE ACTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  A. Supported Edwa	rd Mungia City Council
(Attach lists on plain paper to complete this report if necessary.)	
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. TOTAL UNITEMIZED POLITICAL CONTRIBUTION TOTALS PLEDGES, LOANS, OR GUARANTEES OF CONTRIBUTIONS MADE ELECTRONICALI check here if this report qualifies for the higher item	LOANS, ÒR Y) \$ 0.00
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GU	\$ 45,000.00
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	TURES \$ 141.79
4. TOTAL POLITICAL EXPENDITURES	\$ 94,813.84
CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAIN OF THE REPORTING PERIOD	TAINED AS OF THE LAST DAY \$ 16,996.31
OUTSTANDING 6. TOTAL PRINCIPAL AMOUNT OF ALL OUT LAST DAY OF THE REPORTING PERIOD	STANDING LOANS AS OF THE \$ 0.00
16 AFFIDAVIT	<u> </u>
true and	or affirm, under penalty of perjury, that the accompanying report is correct and includes all information required to be reported by me e 15, Election Code.
	Cabell Hobbs
	Signature of Campaign Treasurer
AFFIX NOTARY STAMP / SEAL ABOVE	
Sworn to and subscribed before me, by the said	this the day
of, 20, to certify which, witness my hand	
Signature of officer administering oath Printed name of officer	administering oath Title of officer administering oath

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

# FORM GPAC ADDENDUM

					Page 3 of 10
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
BETTER SA PAC				00087479	
14 COMMITTEE	1. Candidates	A. Supported	Misty Spears City Counci	<u>_</u> i	
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			
	Officeholders     Assisted     (Identify by name or, if				
	applicable, classify by party.)	1			
COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Kelly Gonzalez City Cour	ncil	
(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.)		Sukh Kaur City Council		
(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

			4 of 10
17 COMMITT BETTER		<b>18</b> Filer ID 00087479	(Ethics Commission Filers)
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 45,000.00
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	SANIZATION	\$
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	\$ 94,813.84
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	ONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 5/10
2	FILER NAME BETTER SA			3	Filer ID (Ethics Commission Filers) 00087479
4	Date 05/20/2025	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$) \$7,500.00
_		San Antonio, TX 78217			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)	
	Date 05/06/2025	Full name of contributor out-of-state PAC (ID#:_ El Dorado Partners, LLC Contributor address; City; State; Zip Code	)	•	Amount of Contribution (\$) \$15,000.00
	Principal occu	San Antonio, TX 78246  upation / Job title (See Instructions)	Employer (See Instructions	s)	
	Date	Full name of contributor  out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (\$)
	05/15/2025	Full name of contributor out-of-state PAC (ID#:_ Graystreet Light, LP Contributor address; City; State; Zip Code			\$15,000.00
		San Antonio, TX 78246			
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)	
	Date 05/20/2025	Full name of contributor out-of-state PAC (ID#:_Leddy Enterprises, Ltd.  Contributor address; City; State; Zip Code  San Antonio, TX 78217			Amount of Contribution (\$) \$7,500.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)	

#### 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Travel in District Travel Out of District
OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide	e explains how to com	plete this form.		
1 Total pages Schedule F1:	2 FILER NAME			3 Filer ID (	Ethics Commission Filers)
Sch: 1/5 Rpt: 6/10	BETTER SA PAC			00087479	
4 Date	5 Payee name				
04/28/2025	Arena LLC				
6 Amount (\$)	7 Payee address; City;	State; Zip Code	е		
\$10,095.00	1260 E Stringham Ave, Suite	400			
— Foreseditors from					
Expenditure from corporate funds	Salt Lake City, UT 84106				
8 PURPOSE	(a) Category (See Categories listed at the to	op of this schedule)	b) Description		
OF EXPENDITURE	Advertising Expense		<b>=</b>	outside of Texas. Comple	
			<b>—</b>	TX, officeholder living executions are sign/L avout. Pri	nting, Mail Service and
			Postage	osigni Layout, i in	nung, man der vide and
9 Complete ONLY if direct	Candidate/Officeholder name	Office sougl	nt	Office held	<u> </u>
expenditure to benefit C/O	<sup>H</sup> Spears, Misty	-	cil District 9	None	
Date	Payee name				
04/28/2025	Arena LLC				
Amount (\$)	Payee address; City;	State; Zip Code	e		
\$6,841.00	1260 E Stringham Ave, Suite	400			
Expenditure from corporate funds	Salt Lake City, UT 84106				
PURPOSE OF	(a) Category (See Categories listed at the t	op of this schedule)	b) Description		
EXPENDITURE	Advertising Expense		<u> </u>	outside of Texas. Comple TX, officeholder living ex	
			ш		nting, Mail Service and
			Postage		
Complete ONLY if direct	Candidate/Officeholder name	Office sough	nt	Office held	
expenditure to benefit C/OI	<sup>H</sup> Mungia, Edward	City Cound	cil District 4	None	
Date	Payee name				
05/23/2025	Arena LLC				
Amount (\$)	Payee address; City;	State; Zip Code	e		
\$4,062.47	1260 E Stringham Ave, Suite	400			
— Foresaditure from					
Expenditure from corporate funds	Salt Lake City, UT 84106				
PURPOSE	(a) Category (See Categories listed at the t	op of this schedule)	b) Description		
OF EXPENDITURE	Advertising Expense			outside of Texas. Comple	
			Check if Austin, Texting Service	TX, officeholder living ex	pense
			Texting Service	<b></b>	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name	Office sough	 nt	Office held	1
expenditure to benefit C/O			cil District 9	None	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Travel in District Travel Out of District
OTHER (enter a category not listed above)

	The Instruction Guide	e explains how to com	nplete this form.
1 Total pages Schedule F1: Sch: 2/5 Rpt: 7/10	2 FILER NAME BETTER SA PAC		3 Filer ID (Ethics Commission Filers) 00087479
4 Date 05/23/2025	5 Payee name Arena LLC		<b>-</b>
6 Amount (\$)	7 Payee address; City;	State; Zip Cod	10
\$21,645.84	1260 E Stringham Ave, Suite	•	ic.
Ψ21,040.04	1200 E Ottingham 7 (ve, Gaite -	100	
Expenditure from corporate funds	Salt Lake City, UT 84106		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Advertising Expense	op of this schedule)	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Digital Advertising/Video Production
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name  Spears, Misty	Office sough	ht Office held cil District 9 None
Date	Payee name		
05/23/2025	Arena LLC		
Amount (\$)	Payee address; City;	State; Zip Cod	le .
\$17,134.00	1260 E Stringham Ave, Suite	•	
Ψ17,104.00	1200 E Ottingham 7 (ve, Gaite -	100	
Expenditure from corporate funds	Salt Lake City, UT 84106		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Advertising Expense	op of this schedule)	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Digital Advertising/Video Production
Complete ONLY if direct	Candidate/Officeholder name	Office sough	ht Office held
expenditure to benefit C/OF	<sup>H</sup> Gonzalez, Kelly	City Cound	cil District 6 None
Date 05/23/2025	Payee name Arena LLC		
Amount (\$)	Payee address; City;	State; Zip Cod	de
\$2,081.72	1260 E Stringham Ave, Suite		
Expenditure from corporate funds	Salt Lake City, UT 84106		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Advertising Expense	op of this schedule)	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Texting Service
Complete ONLY if direct	Candidate/Officeholder name	Office sough	ht Office held
expenditure to benefit C/O	<sup>†</sup> Gonzalez, Kelly	City Cound	cil District 6 None

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Legal Services

Fees Office Ov Food/Beverage Expense Printing E Gitl/Awards/Memorials Expense Printing E Legal Services Salaries/A

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Credit Card Payment	The Instruction Guide 6		mplete this form.	OTTIEN (enter a category not listed above)	'
1 Total pages Schedule F1:	·		·	3 Filer ID (Ethics Commission I	Filers)
Sch: 3/5 Rpt: 8/10	BETTER SA PAC			00087479	,
4 Date	5 Payee name				
05/23/2025	Arena LLC				
6 Amount (\$)	7 Payee address; City;	State; Zip Co	de		
\$9,994.25	1260 E Stringham Ave, Suite 40	00			
Expenditure from corporate funds	Salt Lake City, UT 84106				
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule)	(b) Description		
EXPENDITURE	Advertising Expense			outside of Texas. Complete Schedule T.  n, TX, officeholder living expense	
			Digital Advert		
			<b>.</b>	3	
9 Complete ONLY if direct	Candidate/Officeholder name	Office sou	aht	Office held	
expenditure to benefit C/O			ncil District 1	City Council	
Data	T				
Date 05/22/2025	Payee name				
05/23/2025	Arena LLC				
Amount (\$)	Payee address; City;	State; Zip Co	de		
\$3,017.27	1260 E Stringham Ave, Suite 40	00			
Expenditure from corporate funds	Salt Lake City, UT 84106				
PURPOSE	(a) Category (See Categories listed at the top	o of this schedule)	(b) Description		
OF EXPENDITURE	Advertising Expense	,	Check if travel	outside of Texas. Complete Schedule T.	
LAFLINDITONE	1		ш	n, TX, officeholder living expense	
	1		Texting Servi	ice	
	<u> </u>				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sou	•	Office held	
0.100.101.01.01.01.01.01.01.01.01.01.01.	H Kaur, Sukh	City Cour	ncil District 1	City Council	
Date	Payee name				
05/27/2025	Arena LLC				
Amount (\$)	Payee address; City;	State; Zip Co	de		
\$9,647.00	1260 E Stringham Ave, Suite 40	00			
	1				
Expenditure from corporate funds	Salt Lake City, UT 84106				
PURPOSE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description		
OF	Advertising Expense	TOI ting solicatio,		outside of Texas. Complete Schedule T.	
EXPENDITURE	1			n, TX, officeholder living expense	
				esign/Layout, Printing, Mail Servi	ice and
			Postage		
Complete ONLY if direct	Candidate/Officeholder name	Office sou		Office held	
expenditure to benefit C/O	H Spears, Misty	City Cour	ncil District 9	None	

#### 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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District
OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/5 Rpt: 9/10	BETTER SA PAC	00087479
4 Date	5 Payee name	
05/27/2025	Arena LLC	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$7,981.00	1260 E Stringham Ave, Suite 400	
Expenditure from corporate funds	Salt Lake City, UT 84106	
8 PURPOSE	·	(h) Description
OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
		Direct Mail Design/Layout, Printing, Mail Service and
		Postage
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	
experialture to benefit c/oi	H Gonzalez, Kelly City Cou	ncil District 6 None
Date	Payee name	
05/09/2025	Lex Politica, PLLC	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$132.50	PO Box 341016	
Expenditure from corporate funds	Austin, TX 78734	<del>,</del>
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description  Check if travel outside of Taxon Complete Schedule T
EXPENDITURE	Legal Services	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Legal Consulting
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	-1	
Date	Payee name	
04/28/2025	Maven Advocacy Partners, LLC	
Amount (\$)	Payee address; City; State; Zip Co	nde
\$1,500.00	PO Box 341016	
. ,		
Expenditure from corporate funds	Austin, TX 78734	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Communications Consulting
		Communications consuming
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sou	Light Office held
expenditure to benefit C/OI		agit. Onloc noid

#### 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	Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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:	
Sch: 5/5 Rpt: 10/10	BETTER SA PAC 00087479
4 Date	5 Payee name
05/06/2025	RightSide Compliance LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$540.00	PO Box 341027
Expenditure from corporate funds	Austin, TX 78734
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Compliance Consulting
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held