

# 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<br>(Ethics Commission Filers)<br>00017315 |  | 2 Total pages filed:<br>6   |  |
| 3 COMMITTEE NAME<br>HOMEPAC of the HBA of Greater Dallas       |  |  |  | <b>OFFICE USE ONLY</b><br><br>Date Received<br>ELECTRONICALLY FILED<br>06/05/2025<br><br>Date Hand-delivered or Date Postmarked<br><br>Receipt #                      Amount<br><br>Date Processed<br><br>Date Imaged |  |
| 4 COMMITTEE ADDRESS  | ADDRESS / PO BOX;    APT / SUITE #;    CITY;    STATE;    ZIP<br>5816 W. Plano Pkwy. #101<br><br>Plano, TX 75093-4636  |  |  |   |  |
| 5 CAMPAIGN TREASURER NAME                                      | MS / MRS / MR                      FIRST                      MI<br>David<br><hr/> NICKNAME                      LAST                      SUFFIX<br>Lehde   |  |  |   |  |
| 6 CAMPAIGN TREASURER STREET ADDRESS<br>(Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE);    APT / SUITE #;    CITY;    STATE;    ZIP CODE<br>5816 West Plano Parkway<br><br>Plano, TX 75093  |  |  |   |  |
| 7 CAMPAIGN TREASURER MAILING ADDRESS                           | STREET ADDRESS OR PO BOX;                      APT / SUITE #;    CITY;    STATE;    ZIP CODE<br>5816 West Plano Parkway<br><br>Plano, TX 75093   |  |  |   |  |
| 8 CAMPAIGN TREASURER PHONE                                     | AREA CODE                      PHONE NUMBER                      EXTENSION<br>(972) 931-4840   |  |  |   |  |
| 9 REPORT TYPE  | <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)  |  |  |   |  |
| 10 MONTHLY REPORT FILING DEADLINE                              | <input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5<br><input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5<br><input type="checkbox"/> March 5 <input checked="" type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5 |  |  |   |  |
| 11 PERIOD COVERED  | Month    Day    Year                      THROUGH                      Month    Day    Year<br>04/26/2025                      05/25/2025  |  |  |   |  |

GO TO PAGE 2

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

## FORM MPAC COVER SHEET PG 2

|   |  |   |
|---|--|---|
| <b>12 COMMITTEE NAME</b><br>HOMEPAC of the HBA of Greater Dallas  |  | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00017315   |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)                     | A. Supported  |
|   |  | B. Opposed  |
|   | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)               | A. Supported  |
|   |  | B. Opposed  |
|   | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.)         |   |
|   | <b>15 CONTRIBUTION TOTALS</b>  | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b><br><input type="checkbox"/> check here if this report qualifies for the higher itemization threshold |
|   | <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)       | \$ 940.00   |
| EXPENDITURE TOTALS  | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>  | \$ 0.00   |
|   | <b>4. TOTAL POLITICAL EXPENDITURES</b>   | \$ 53.35  |
| CONTRIBUTION BALANCE  | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>        | \$ 43,331.10  |
| OUTSTANDING LOAN TOTALS   | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b> | \$ 0.00   |

### 16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

David Lehde

\_\_\_\_\_  
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 and seal of office.

\_\_\_\_\_  
Signature of officer administering oath

\_\_\_\_\_  
Printed name of officer administering oath

\_\_\_\_\_  
Title of officer administering oath

**SUBTOTALS - MPAC****FORM MPAC**  
**COVER SHEET PG 3**  
3 of 6

|  |   |   |
|--|---|---|
| <b>17 COMMITTEE NAME</b><br>HOMEPAC of the HBA of Greater Dallas |   | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00017315 |
| <b>19 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE                 |   | SUBTOTAL AMOUNT   |
| 1.   | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                 | \$ 940.00   |
| 2.   | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                              | \$  |
| 3.   | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS  | \$  |
| 4.   | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION               | \$  |
| 5.   | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$  |
| 6.   | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                     | \$  |
| 7.   | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                 | \$  |
| 8.   | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION                 | \$  |
| 9.   | <input type="checkbox"/> SCHEDULE E: LOANS  | \$  |
| 10.  | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS              | \$ 53.35  |
| 11.  | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   | \$  |
| 12.  | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                        | \$  |
| 13.  | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  | \$  |
| 14.  | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                      | \$  |
| 15.  | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER       | \$  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|   |   |  |
|---|---|--|
| <b>The Instruction Guide explains how to complete this form.</b>            |   | <b>1</b> Total pages Schedule A1:<br>Sch: 1/2 Rpt: 4/6     |
| <b>2</b> FILER NAME<br>HOMEPAC of the HBA of Greater Dallas                 |   | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017315   |
| <b>4</b> Date<br>05/01/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Byrne, Colin<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Dallas, TX 75204 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Director    |   | <b>9</b> Employer (See Instructions)<br>GFO Home           |
| Date<br>05/19/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Cassano, Derek<br><hr/> Contributor address; City; State; Zip Code<br><br>Carrollton, TX 75010             | Amount of Contribution (\$)<br><br>\$40.00                 |
| Principal occupation / Job title (See Instructions)<br>Sales Representative |   | Employer (See Instructions)<br>Home Depot                  |
| Date<br>05/19/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Jackson, James<br><hr/> Contributor address; City; State; Zip Code<br><br>Aledo, TX 76008                  | Amount of Contribution (\$)<br><br>\$80.00                 |
| Principal occupation / Job title (See Instructions)<br>Principal            |   | Employer (See Instructions)<br>Talsen Design               |
| Date<br>05/18/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Lehde, David<br><hr/> Contributor address; City; State; Zip Code<br><br>Frisco, TX 75034                   | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>Director             |   | Employer (See Instructions)<br>Dallas Builders Association |
| Date<br>05/19/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Murphy, Frank (Mr.)<br><hr/> Contributor address; City; State; Zip Code<br><br>Heath, TX 75032             | Amount of Contribution (\$)<br><br>\$20.00                 |
| Principal occupation / Job title (See Instructions)<br>Project Manager      |   | Employer (See Instructions)<br>Wynn/Jackson, Inc           |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|   |  |  |
|---|--|--|
| <b>The Instruction Guide explains how to complete this form.</b>                            |  | <b>1</b> Total pages Schedule A1:<br>Sch: 2/2 Rpt: 5/6   |
| <b>2</b> FILER NAME<br>HOMEPAC of the HBA of Greater Dallas                                 |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00017315 |
| <b>4</b> Date<br>05/19/2025   | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ohanlon, Pat<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br><br>Colleyville, TX 76034 | <b>7</b> Amount of Contribution (\$)<br><br>\$20.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Director of Land Aquisition |  | <b>9</b> Employer (See Instructions)<br>Toll Brothers    |
| Date<br>05/19/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ritchie, Adam<br><hr/> Contributor address; City; State; Zip Code<br><br>Fate, TX 75189                         | Amount of Contribution (\$)<br><br>\$80.00               |
| Principal occupation / Job title (See Instructions)<br>Sales Director                       |  | Employer (See Instructions)<br>Henry                     |
| Date<br>05/19/2025  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Roberts, Matt<br><hr/> Contributor address; City; State; Zip Code<br><br>Aubrey, TX 76227                       | Amount of Contribution (\$)<br><br>\$80.00               |
| Principal occupation / Job title (See Instructions)<br>Sales Manager                        |  | Employer (See Instructions)<br>Rio Grande Reps           |

# 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  
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 explains how to complete this form.

|   |   |   |
|---|---|---|
| 1 Total pages Schedule F1:<br>Sch: 1/1 Rpt: 6/6   | 2 FILER NAME<br>HOMEPAC of the HBA of Greater Dallas                                | 3 Filer ID (Ethics Commission Filers)<br>00017315   |
| 4 Date<br>05/02/2025  | 5 Payee name<br>Authorize.net   |   |
| 6 Amount (\$)<br>\$53.35<br><br><input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code<br>PO Box 947<br><br>American Fork, UT 84003 |   |
| 8 PURPOSE OF EXPENDITURE  | (a) Category (See Categories listed at the top of this schedule)<br>Fees            | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>credit card fees |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH                              | Candidate/Officeholder name   | Office sought<br>Office held  |