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) 00015657 3 COMMITTEE NAME **OFFICE USE ONLY** San Antonio Builders PAC I Date Received **ELECTRONICALLY FILED** 07/07/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 3625 Paesanos Pkwy Suite 100 San Antonio, TX 78231 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Mr. Ed NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Berlanga CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE TREASURER 3625 Paesanos Pkwy STREET **ADDRESS** Suite 100 (Residence or Business) San Antonio, TX 78231 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** MAILING **ADDRESS CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (210) 471-1264 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 X 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** 05/26/2025 06/25/2025

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

				_	
L2 COMMITTEE NAME	AC 1			13 Filer ID	
San Antonio Builders P.	AC I	,		000156)O1
4 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Su	ıkh Kaur City Council		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2 Magauras	A. Supported			
	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.)				
5 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZEL PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANTEES IADE ELECTRONIC	ALLY)	\$	0.00
	2. TOTAL POLITICA	L CONTRIBUTIO		\$	0.00
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURES				0.00
	4. TOTAL POLITICA	L EXPENDITURE	:S	\$	13,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD				6,420.76
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE		UTSTANDING LOANS AS OF DD	THE \$	0.00
.6 AFFIDAVIT	l			·	
		true a	ar, or affirm, under penalty of p and correct and includes all info Title 15, Election Code.	perjury, that tl prmation requ	he accompanying report is uired to be reported by me
			Mr. Ec	d Berlanga	
			Signature of C		asurer
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	l before me. by the said		,	this the	day
	, 20, to certify v				
Signature of officer ad	lministering oath	Printed name of office	cer administering oath	Title of	officer administering oath

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC

						Page 3 of 8
12 COMMITTEE NAME					12 Filor ID	(Ethics Commission Filers)
San Antonio Builders PAC	ı				13 Filer ID 00015657	(Ethics Commission Filers)
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Misty Spears (City Council	00013001	
(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				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Ivalis Gonzalez	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 - MPAC

FORM MPAC COVER SHEET PG 3

				4 of 8			
17 COMMITTE	EE NAME	18 Filer ID	(Ethics Commis	ssion Filers)			
San Antor	00015657						
19 SCHEDULE NAME OF S	SUBTOTA	L AMOUNT					
1. X	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS						
2. X	2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS						
3. X	3. X SCHEDULE B: PLEDGED CONTRIBUTIONS						
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION						
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION						
6.	6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION						
7.	7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION						
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION						
9. X	SCHEDULE E: LOANS		\$	0.00			
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	13,500.00			
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00			
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	\$	0.00				
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00			
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$				
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$				
			•				

PLE	OGED CONTRIBU	TIONS			SCHEDULE	В
TI	he Instruction Guide exp	1	Total pages Schedule B: Sch: 1/1 Rpt: 5/8			
2 FILER NA	AME onio Builders PAC I		3	3 Filer ID (Ethics Commission Filers) 00015657		
4	OF UNITEMIZED PLEDO	SES				0.00
5 Date	6 Full name of pledgor 7 Pledgor Address;	out-of-state PAC (ID#		_) 8	Amount of pledge (\$) 9	
10 Princinal	occupation / Job title (See Instru	uctions)	11 Employer (See Ins	tructi	Check if travel outside of Texas. Complete Sche	edule T
10 i illicipai	occupation / Job title (Jee maile	icuonay	Employer (See Ins	suucu	ions)	

	LOANS					SCHEDUI	ΕE
	The Instruction	on Guide explains how to o		1 Total pages Schedule E: Sch: 1/1 Rpt: 6/8			
2	FILER NAME San Antonio Bui	lders PAC I		3 Filer ID (Ethics Commission Filers) 00015657			
4	TOTAL OF UN	IITEMIZED LOANS			'	\$	0.00
5	Date of loan	7 Name of lender	out-of-state PA	.C (ID#:		9 Loan Amount (\$)	
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instru	ctions)	•	
14	Description of Coll None	ateral		15 Check if personal fun	ds were deposite	d into political account (See Instructions)	
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guarante	ed (\$)
	not applicable	18 Guarantor address; City;	State;	Zip Code			
20	Principal occupation	on		21 Employer (See Instru	ctions)	1	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 7/8	San Antonio Builders PAC I 00015657
4 Date	5 Payee name
05/30/2025	Gonzalez, Ivalis
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	8647 Wurzback Rd Bldg E
	Office D
Expenditure from corporate funds	San Antonio, TX 78240
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	City Council Campaign
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/29/2025	Kaur, Sukh
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 120101
φοσο.σσ	1 0 BOX 120101
Expenditure from corporate funds	San Antonio, TX 78212
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	City Council Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
05/29/2025	Spears, Misty
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	2834 Sierra Salinas
Expenditure from corporate funds	San Antonio, TX 78259
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	City Council Campaign
0 1. 6	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
onpondituro to bottoni 0/0	

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ı - I Co	mmittee	Legal Service	Memorials Expenses ction Guide			pense ages/Contract I		Travel Out of Dis OTHER (enter a	strict category not listed above)
┰	Total pages Schedule F1:	2	FII FR NAMI	=					3	Filer ID	(Ethics Commission Filers)
ľ	Sch: 2/2 Rpt: 8/8	_	San Antoni		PAC I				ا ا	00015657	(======,
Ļ		L			717.01					00013037	
4	Date	5	Payee name								
	06/09/2025		Texas Eco	nomic Fur	nd						
6	Amount (\$)	7	Payee addre	ss; Cit	y;	State;	Zip Co	de			
	\$12,000.00										
╓	Expenditure from corporate funds		TX								
Ļ	·	_						<i></i>			
8	PURPOSE OF	(a)	Category (S				dule)	(b) Descrip			
	EXPENDITURE		Contributio				#**			ide of Texas. Com , officeholder living	
			Candidate/	Officerioic	ier/Politica	ı Commi	ilee	Contri		., onicendider living	ехрепзе
								Contin	oduon		
L											
9	Complete ONLY if direct expenditure to benefit C/OH	⊢ (Candidate/Off	iceholder n	ame	0	ffice sou	jht		Office he	eld
L	oxponantaro to bonont o, o.										
l											