

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00039000		2 Total pages filed: 9	
3 COMMITTEE NAME ACEC Houston PAC				OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/05/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 2180 North Loop W, Suite 320 Houston, TX 77018				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. David NICKNAME LAST SUFFIX Hagy				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2180 North Loop W, Suite 320 Houston, TX 77018				
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2180 N. Loop West, Suite 320 Houston, TX 77018				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 426-0800				
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 checked="" type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5				
11 PERIOD COVERED	Month Day Year THROUGH Month Day Year 05/26/2025 06/25/2025				

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME ACEC Houston PAC		13 Filer ID (Ethics Commission Filers) 00039000
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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.)	The Honorable Fred Flickinger Houston City Council, District E
15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 204,719.50
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
16 AFFIDAVIT <div style="text-align: right; margin-top: 20px;">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.</div> <div style="text-align: right; margin-top: 20px;">Mr. David Hagy _____ Signature of Campaign Treasurer</div> <div style="margin-top: 20px;">AFFIX NOTARY STAMP / SEAL ABOVE</div> <div style="margin-top: 20px;">Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</div> <div style="margin-top: 20px; display: flex; justify-content: space-between;"><div>_____ Signature of officer administering oath</div><div>_____ Printed name of officer administering oath</div><div>_____ Title of officer administering oath</div></div>		

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

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12 COMMITTEE NAME ACEC Houston PAC		13 Filer ID (Ethics Commission Filers) 00039000
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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.)	The Honorable Tiffany Thomas Houston City Council, District F
	COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)
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.)		Commissioner Adrian Garcia Harris County Commissioner, Precinct 2

SUBTOTALS - MPAC**FORM MPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME ACEC Houston PAC		18 Filer ID 00039000	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	6,500.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00
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 checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	7,000.00
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/2 Rpt: 5/9
2 FILER NAME ACEC Houston PAC		3 Filer ID (Ethics Commission Filers) 00039000
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baird, William (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77478	7 Amount of Contribution (\$) \$1,300.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) A&S Engineers, Inc.
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cibor, Joseph (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Cibor Geoconsultants
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Enrique (Mr.) <hr/> Contributor address; City; State; Zip Code Richmond, TX 77406-6525	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Executive Vice President		Employer (See Instructions) Kuo & Associates, LLC
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Eric (Mr.) <hr/> Contributor address; City; State; Zip Code Conroe, TX 77304	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) EDGE Engineering, PLLC
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Bonnie (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77077-0000	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) MBCO Engineering, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 6/9
2 FILER NAME ACEC Houston PAC		3 Filer ID (Ethics Commission Filers) 00039000
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parent, Elizabeth (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77043	7 Amount of Contribution (\$) \$700.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) 5Engineering
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singh, Priti (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77054	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Associated Testing Laboratories, Inc.
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Gian (Mr.) <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78130-3203	Amount of Contribution (\$) \$700.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Seagull PME

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: Sch: 1/1 Rpt: 7/9	
2 FILER NAME ACEC Houston PAC		3 Filer ID (Ethics Commission Filers) 00039000	
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of pledge (\$)	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 8/9
2 FILER NAME ACEC Houston PAC		3 Filer ID (Ethics Commission Filers) 00039000
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (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 / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None	15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>	
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

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: Sch: 1/1 Rpt: 9/9	2 FILER NAME ACEC Houston PAC	3 Filer ID (Ethics Commission Filers) 00039000
4 Date 05/28/2025	5 Payee name Flickinger, Fred (The Honorable)	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 41964 Houston, TX 77241	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to the Fred Flickinger Campaign, Houston City Council, District E.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2025	Payee name Garcia, Adrian (Commissioner)	
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 56386 Houston, TX 77256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to the Adrian Garcia Campaign, Harris County Commissioner, Precinct 2.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/28/2025	Payee name Thomas, Tiffany (The Honorable)	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 56386 Houston, TX 77256	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to the Tiffany D. Thomas Campaign, Houston City Council, District F.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held