#### 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) 00015700 3 COMMITTEE NAME **OFFICE USE ONLY GHBA HOME-PAC** Date Received **ELECTRONICALLY FILED** 07/14/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 9511 W. Sam Houston Pkwy N. Date Hand-delivered or Date Postmarked Change of Address Houston, TX 77064-5398 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Aimee E. NAME NICKNAME LAST **SUFFIX** Bertrand STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 9511 W. Sam Houston Pkwy N. STREET **ADDRESS** (Residence or Business) Houston, TX 77064-5398 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 9511 W. Sam Houston Pkwy N. MAILING **ADDRESS** Houston, TX 77064-5398 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 664-1432 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Day Year Month Year Day Month **COVERED THROUGH** 04/24/2025 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Other Runoff 05/03/2025 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)
GHBA HOME-PAC			00015700	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. David Luther County Com	missioner	
(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		
		B. Opposed		
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	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)	\$	6,375.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	50,858.91
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	86,636.97
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			·	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Ms. Aimee	E. Bertrand	
		Signature of Ca	mpaign Treasur	er
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said	, ti	his the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of office	er administering oath

### **GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE**

### FORM GPAC **ADDENDUM**

					Page 3 of 16
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
GHBA HOME-PAC				00015700	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable William Ferq	guson Mayor	
(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.)				
COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Froberg Alfred County	commissioner	
(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 16

					4 01 10
<b>17</b> CC	17 COMMITTEE NAME 18 Filer ID				nics Commission Filers)
Gŀ	нва нс	ME-PAC	00015700		
<b>19</b> SC	HEDULI	SUBTOTALS			
NΑ	ME OF	SCHEDULE			SUBTOTAL AMOUNT
				<u> </u>	
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	6,375.00
				ļ.	0.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
		COLUED III E. D. DI EDGED CONTRIDITIONS			0.00
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	ıR		
4.	Ш	ORGANIZATION		\$	
-		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	TION OR		
5.	Ш	LABOR ORGANIZATION		\$	
		COLUMN TO A MONETARY CURRORT FROM CORRORATION OR LARGE ORG	ANUZATION!		
6.	Ш	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$	
_		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR		1.	
7.	Ш	ORGANIZATION		\$	
			200 1117171011	<u> </u>	
8.	Ш	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	DRGANIZATION	\$	
				ļ.	0.00
9.	Х	SCHEDULE E: LOANS		\$	0.00
			_	1.	
10	. <u>X</u>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	o ·	\$	50,858.91
				<u> </u>	
11	. <u>X</u>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12	. <u>X</u>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13	. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14	· Ш	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F	RETURNED		
15	· Ш	TO FILER		\$	
				<u> </u>	
i					

M	ONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDU	LE <b>A1</b>
The	e Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 5/16	
	ER NAME			3	Filer ID (Ethics Commission 00015700	on Filers)
	Date  05/13/2025  5 Full name of contributor out-of-state PAC (ID#:)  Joseph, Coleman (Mr.)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00	
9 Drin	ocinal occu	Hockley, TX 77447  upation / Job title (See Instructions)	Employer (See Instructions			
	esident	pation / Job title (See Instructions)	Daco Paving	s) 		
Date 04/3	e 30/2025	Full name of contributor out-of-state PAC (ID#: Taylor Morrison PAC	)	•	Amount of Contribution (\$)	\$5,000.00
		Houston, TX 77042				
Prin	ncipal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
Date 04/2	e 25/2025	Full name of contributor out-of-state PAC (ID#: Turnbaugh, Renae' (Ms.)  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$375.00
Prin	ncinal occu	Friendswood , TX 77546  upation / Job title (See Instructions)	Employer (See Instructions	<u>s)</u>		
	es Mana		LG Home Appliance	-,		

PLEDGED CONTRIBUTIONS	SCHEDULE B		
The Instruction Guide explains how to complete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 6/16		
2 FILER NAME GHBA HOME-PAC	3 Filer ID (Ethics Commission Filers) 00015700		
4 TOTAL OF UNITEMIZED PLEDGES	\$ 0.00		
5 Date 6 Full name of pledgorout-of-state PAC (ID#:)  7 Pledgor Address; City; State; Zip Code	8 Amount of pledge (\$) 9 In-kind description (If applicable)  Check if travel outside of Texas. Complete Schedule 1		
10 Principal occupation / Job title (See Instructions)	1 <b>—</b>		

L	OANS					SCHEDU	LE <b>E</b>
TI	he Instructio	on Guide explains ho	w to complete this f	orm.	1	ages Schedule E: /1 Rpt: 7/16	
	LER NAME HBA HOME-PA	AC			3 Filer ID 00015	(Ethics Commission 700	Filers)
4 T(	OTAL OF UN	IITEMIZED LOANS			•	\$	0.00
<b>5</b> Da	ate of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)	
fin	lender a ancial stitution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
<b>12</b> Pr	incipal occupatio	on / Job title (See Instruction	ıs)	13 Employer (See Instruction	s)	•	
<b>14</b> De	escription of Coll	ateral		15 Check if personal funds w	ere deposite	d into political account (See Instructions)	
	JARANTOR FORMATION	17 Name of guarantor				19 Amount Guarante	ed (\$)
	not applicable	18 Guarantor address;	City; State;	Zip Code			
<b>20</b> Pr	incipal occupation	on		21 Employer (See Instruction	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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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: 1/9 Rpt: 8/16	GHBA HOME-PAC 00015700
4 Date	5 Payee name
06/26/2025	Abbott, Greg (The Honorable)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,000.00	PO Box 308
Expenditure from corporate funds	Austin, TX 78767
8 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.  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
06/24/2025	Barry, Jeff (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	P.O. Box 21
Expenditure from corporate funds	Houston, TX 77588
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	4
Date	Payee name
06/03/2025	Briones, Lesley (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$7,750.00	PO Box 56386
. ,	
Expenditure from corporate funds	Houston, TX 77256
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Contributions/Donations Made By  Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ommittee Legal Service			es/Contract Labor	Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:		<u> </u>			3 Filer ID	(Ethics Commission Filers)
-	Sch: 2/9 Rpt: 9/16	GHBA HOME-PAC				00015700	(
4	Date	Payee name					
	06/18/2025	Clark, Lisa					
6	Amount (\$)	Payee address; City	r; State;	Zip Code	?		
	\$593.13	1815 Candlelight Plac	ce Dr.				
	Expenditure from corporate funds	Houston, TX 77018					
8	PURPOSE	A) Category (See Categories	isted at the top of this sched	<sub>dule)</sub> (k	) Description		
	OF EXPENDITURE	Food/Beverage Expe	nse			outside of Texas. Com	
					$\Box$	TX, officeholder living	e for a fundraiser.
					1 ood and bev	relage expense	or a furidialser.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder na	ame Of	ffice sough	it	Office he	eld
	Date	Payee name					
	06/24/2025	Creighton, Brandon (	The Honorable)				
	Amount (\$)	Payee address; City	/; State;	Zip Code	)		
	\$1,000.00	2257 N. Loop 336					
		Suite 140-366					
	Expenditure from corporate funds	Conroe, TX 77304					
	PURPOSE	a) Category (See Categories	isted at the top of this sched	<sub>dule)</sub> (k	Description		
	OF EXPENDITURE	Contributions/Donation			<u> </u>	outside of Texas. Com	
		Candidate/Officehold	er/Political Commit	ttee	Campaign co	TX, officeholder living	expense
					Campaign	Harbation	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder na	ame Of	ffice sough	ıt	Office he	eld
	Date	Payee name					
	05/01/2025	Davis, Dan (The Hon	orable)				
	Amount (\$)	Payee address; City	/; State;	Zip Code	<u> </u>		
	\$500.00	P O Box 1113		•			
	Expenditure from corporate funds	Manvel, TX 77578					
	PURPOSE	a) Category (See Categories	isted at the top of this sched	<sub>dule)</sub> (k	Description		
	OF EXPENDITURE	Contributions/Donation			<u> </u>	outside of Texas. Com	
		Candidate/Officehold	er/Political Commit	ttee	Campaign co	TX, officeholder living	expense
					Campaign CO	minullon	
	Complete ONLY if direct	Candidate/Officeholder na	ame Of	ffice sough	ıt	Office he	ald
	expenditure to benefit C/OI	Candidate/Officeriolider Hi	airie UI	ince sougi	ıı	Onice ne	สน
_							

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/9 Rpt: 10/16	GHBA HOME-PAC 00015700
4 Date	5 Payee name
06/24/2025	DeAyala, Mano (The Honorable)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$8,750.00	12335 Kingsride Lane
Expenditure from	#416
corporate funds	Houston, TX 77024
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
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Data	
Date 06/25/2025	Payee name DeAyala, Mano (The Honorable)
Amount (\$)	
\$500.00	Payee address; City; State; Zip Code  12335 Kingsride Lane
Ψ300.00	#416
Expenditure from	Houston, TX 77024
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
05/01/2025	Flickinger, Fred (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	5627 Spring Lodge Dr
Expenditure from corporate funds	Kingwood, TX 77345
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF 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/Onicenoider/Political Committee Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H

#### 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: 4/9 Rpt: 11/16	GHBA HOME-PAC 00015700
4 Date	5 Payee name
05/06/2025	Flickinger, Fred (The Honorable)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	5627 Spring Lodge Dr
Expenditure from corporate funds	Kingwood, TX 77345
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  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 continuation
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beliefft C/O	
Date	Payee name
05/01/2025	Garcia, Adrian (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 56386
Evponditure from	
Expenditure from corporate funds	Houston, TX 77256
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder living expense
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
•	
Date	Payee name
05/01/2025	Giusti, Joe (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	11730 Hwy 6
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Expenditure from	
corporate funds	Santa Fe, TX 77510
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<del>1</del>

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4. Total name Oct. 11. 51	
1 Total pages Schedule F1:	
Sch: 5/9 Rpt: 12/16	GHBA HOME-PAC 00015700
4 Date	5 Payee name
05/27/2025	Greater Houston Builders Association
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,504.83	9511 W. Sam Houston Parkway
φ0,504.63	9311 W. Saili Houston Farkway
Expenditure from	
corporate funds	Houston, TX 77064
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Admin fees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<b>⊣</b>
Date	Douge name
	Payee name
06/04/2025	Greater Houston Builders Association
Amount (\$)	Payee address; City; State; Zip Code
\$5,510.95	9511 W. Sam Houston Parkway
Expenditure from corporate funds	Houston, TX 77064
•	
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
	Admin fees
	7 Millio 1003
0 1: 0.11.7.7.1.	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
onponditure to senionic ere-	
Date	Payee name
05/01/2025	Henry, Mark (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	12900 FM 3436 Rd
Ψ1,000.00	12300 FM 3430 Ku
Expenditure from	
corporate funds	Dickinson, TX 77539
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 6/9 Rpt: 13/16	2 FILER NAME GHBA HOME-PAC 3 Filer ID (Ethics Commission Filers) 00015700
<ul><li>4 Date 06/16/2025</li><li>6 Amount (\$)</li></ul>	<ul> <li>5 Payee name         Hollins, Chris (The Honorable)</li> <li>7 Payee address; City; State; Zip Code</li> </ul>
\$500.00  Expenditure from corporate funds	P.O. Box 56386  Houston, TX 77256
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  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 05/01/2025	Payee name Huffman, Mary Nan (The Honorable)
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 1 E Greenway Plaza
Expenditure from corporate funds	ste 225 Houston, TX 77046
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 05/20/2025	Payee name Huffman, Mary Nan (The Honorable)
Amount (\$) \$500.00  Expenditure from corporate funds	Payee address; City; State; Zip Code  1 E Greenway Plaza ste 225 Houston, TX 77046
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	d 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: 7/9 Rpt: 14/16	GHBA HOME-PAC 00015700			
4 Date	5 Payee name			
05/29/2025	Kamin, Abbie (The Honorable)			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$750.00	P. O. Box 56386			
Expenditure from corporate funds	Houston, TX 77256			
8 PURPOSE		_		
OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Contributions/Donations Made By			
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/OI				
Data		_		
Date	Payee name			
06/25/2025	Luther, David (Mr.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$3,000.00	P.O. 11			
Expenditure from corporate funds	Waller, TX 77484			
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			
	Campaign contribution			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_		
expenditure to benefit C/OI	H			
Date	Payee name	_		
06/24/2025				
	Morgan, Matt (The Honorable)			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00	502 FM 359			
Expenditure from	St 130			
corporate funds	Richmond, TX 77406			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF	Contributions/Donations Made By			
EXPENDITURE	Candidate/Officeholder/Political Committee			
	Campaign contribution			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OH				

### 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

Candidate/Officeholder/Politica Credit Card Payment	l 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: 8/9 Rpt: 15/16	GHBA HOME-PAC 00015700
4 Date	5 Payee name
06/16/2025	Peck, Amy (The Honorable)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$750.00	P.O. Box 1581
Expenditure from corporate funds	Houston, TX 77251
8 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.  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/29/2025	Pollard, Edward (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$750.00	6343 Skyline Drive Ste. #16
Expenditure from corporate funds	Houston, TX 77057
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/01/2025	Prestage, Grady (The Honorable)
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	PO Box 835
Expenditure from corporate funds	Missouri City, TX 77459
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
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<del>1</del>

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Cor Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contrac	
·	The Instruction Guide explains how to complete this	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 9/9 Rpt: 16/16	GHBA HOME-PAC	00015700
4 Date	5 Payee name	
05/01/2025	Texas Ethics Commission	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$500.00	201 East 14th St	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	10th Floor	
Expenditure from		
corporate funds	Austin, TX 78701	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descri	
EXPENDITURE		eck if travel outside of Texas. Complete Schedule T.
	Late	eck if Austin, TX, officeholder living expense
	Late	iee
O Commission ONLY if direct	Condidate/Officeholder name	Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
· 		
Date	Payee name	
05/01/2025	Thomas, Tiffany (The Honorable)	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	P.O. Box 2271	
Expenditure from corporate funds	Alief, TX 77411	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ription
OF EXPENDITURE	Contributions/Donations wade by	eck if travel outside of Texas. Complete Schedule T.
	Garrandato/ Ginediff Ginteda Gorinintees	eck if Austin, TX, officeholder living expense
	Calli	paign contribution
Operation ONLY if discont	Out distance (Office Includes a constant	Office health
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
· 		