#### 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) 00050632 3 COMMITTEE NAME **OFFICE USE ONLY** Texas REALTORS Issues Political Action Committee Date Received **ELECTRONICALLY FILED** 11/03/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 1115 San Jacinto Blvd., Ste. 200 Austin, TX 78701-1906 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Mrs. Lori NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Levy CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1115 San Jacinto Blvd., Ste. 200 STREET **ADDRESS** (Residence or Business) Austin, TX 78701-1906 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** P.O. Box 2246 MAILING **ADDRESS** Austin, TX 78768-2246 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 370-2177 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 December 5 September 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year

**THROUGH** 

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10/25/2025

GO TO PAGE 2

09/26/2025

**COVERED** 

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME		<del></del>	13	Filer ID	(Ethics Commission Filers)
Texas REALTORS Issu	ues Political Action Con	mittee		00050632	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	<u>,                                     </u>		
(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.)		TX Prop 9 Election Date n for tangible property u		
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	POLITICAL CONTRIBUTION POLITICAL CONTRIBUTION POLITICAL	NS, ÒR	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI	<b>L CONTRIBUTIONS</b> DGES, LOANS, OR GUARA	NTEES OF LOANS)	\$	15,271.85
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITUR	ES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	1,046,594.28
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAIN G PERIOD	NED AS OF THE LAST DA	\Y	861,164.65
OUTSTANDING LOAN TOTALS	<b>I</b>	AMOUNT OF ALL OUTSTAN REPORTING PERIOD	IDING LOANS AS OF TH	<b>\$</b>	0.00
16 AFFIDAVIT	1			<u> </u>	
		true and corre	rm, under penalty of perju ct and includes all informa , Election Code.		
			Mrs. Lori	Levy	
		-	Signature of Camp	aign Treasu	rer
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 ad	lministering oath	Printed name of officer admi	nistering oath	Title of office	eer administering oath

### MONTHLY FILING GPAC REPORT: PURPOSE

### FORM MPAC **ADDENDUM**

			Page 3 01 18
12 COMMITTEE NAME			13 Filer ID (Ethics Commission Filers)
Texas REALTORS Issues	Political Action Com	mittee	00050632
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	
	2. Measures	A. Supported	Ballot ID:TX Prop 10 Election Date:2025-11-04 Desc:Property tax
	(Describe by date and location of election and nature of issue.)		exemption for property destroyed by fire
		B. Opposed	
	Officeholders     Assisted  (Identify by name or, if		
	applicable, classify by party.)		
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
(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	Ballot ID:TX Prop 11 Election Date:2025-11-04 Desc:Increase homestead tax exemption for elderly and disabled
		B. Opposed	
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)		
COMMITTEE	1. Candidates	A. Supported	
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	Ballot ID:TX Prop 13 Election Date:2025-11-04 Desc:Increase homestead tax exemption from \$100,000 to \$140,000
		B. Opposed	
	3. Officeholders Assisted		
	(Identify by name or, if	I	

### MONTHLY FILING GPAC REPORT: PURPOSE

### FORM MPAC **ADDENDUM**

			Page 4 01 18
12 COMMITTEE NAME			13 Filer ID (Ethics Commission Filers)
Texas REALTORS Issues	Political Action Com	mittee	00050632
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	
(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	Ballot ID:TX Prop 17 Election Date:2025-11-04 Desc:Property tax exemption for border security infrastructure
		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	
(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	Ballot ID:Prop B Election Date:2025-11-04 Desc:Bexar County Use \$311 million of the venue tax money to fund creation of a new multipurpose arena.
		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	
(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	Ballot ID:Prop A Election Date:2025-11-04 Desc:Bexar County Raise hotel occupancy tax from 1.75% to 2% to help fund a rodeo and event district.
		Б. Орросса	
	Officeholders     Assisted (Identify by name or, if		

# FORM MPAC MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 5 of 18 **12** COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) Texas REALTORS Issues Political Action Committee 00050632 14 COMMITTEE 1. Candidates A. Supported **ACTIVITY** (Identify by name or, if applicable, classify by party.) (Attach lists on plain B. Opposed paper to complete this report if necessary.) A. Supported Ballot ID:CollinProp Election Date:2025-11-04 Desc:Collin County 2. Measures (Describe by date and location of election and nature of issue.) Confirm the creation of the Collin Co Emergency Services District No 1 B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.

### **SUBTOTALS - MPAC**

## FORM MPAC COVER SHEET PG 3 6 of 18

					0 01 10
<b>17</b> CC	MMITTE	EE NAME	18 Filer ID	(Ethic	cs Commission Filers)
Те	xas RE	ALTORS Issues Political Action Committee	00050632		
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	)R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		ANIZATION	\$		
7.	Х	!	\$	15,271.85	
8.	Х	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	925,000.00
9.		SCHEDULE E: LOANS		\$	
10.	. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	157,428.76
11.	. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	889,165.52
12.	. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	4,510.24
13.	. 🔲	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	3,382.29

# NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C4

$\vdash$						
	The Instru	ction Guide explains how to complete this form.	1 Total pages Schedule C4: Sch: 1/1 Rpt: 7/18			
2	FILER NAME		3	Filer ID	(Ethics Commission Filers)	
	Texas REAL	TORS Issues Political Action Committee		00050632		
4	Date	5 Corporation / Labor Organization name	6	Amount (\$)		
L	10/01/2025	Texas Association of REALTORS			14,500.95	
Г	Date	Corporation / Labor Organization name		Amount (\$)		
L	10/01/2025	Texas Association of REALTORS			770.90	

# PLEDGED CONTRIBUTIONS FROM CORPORATION OR SCHEDULE D **LABOR ORGANIZATION** 1 Total pages Schedule D: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 8/18 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Texas REALTORS Issues Political Action Committee 00050632 5 Corporation / Labor Organization Name In-kind description (if Date Amount of pledge (\$) applicable) 10/09/2025 National Association of REALTORS \$725,000.00 6 Corporation / Labor Organization address; City; State; Zip Code Chicago, IL 60611 Check if travel outside of Texas. Complete Schedule T. Corporation / Labor Organization Name Amount of In-kind description (if Date pledge (\$) applicable) 09/26/2025 Texas Association of REALTORS \$200,000.00 Corporation / Labor Organization address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T.

# 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

Candidate/Officeholder/Politica Credit Card Payment		Legal Services  The Instruction Guide	Salaries/\	Wages	s/Contract Labor		OTHER (enter a	category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers	5)
Sch: 1/3 Rpt: 9/18	l	LTORS Issues Pol	litical Action Com	nmitt	tee		00050632		
4 Date	5 Payee name								
10/01/2025	Frost Bank								
6 Amount (\$)	<b>7</b> Payee addre	ss; City;	State; Zip Co	ode					
\$372.05	P.O. Box 1	727							
X Expenditure from corporate funds	Austin, TX	78767							
8 PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b)	Description				
OF EXPENDITURE	Accounting	Banking/					de of Texas. Com		
					<b>—</b>		officeholder living		
					Account fee of	וווכ	ncome rece	iveu	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name	Office sou	ught			Office he	eld	
Date	Payee name								
10/14/2025	SGS Inc								
Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
\$32,225.18	6211 NW 1	•	, р						
Ψ0 <i>L</i> , <i>L</i> 20.10	02111111	5211d Ot							
X Expenditure from corporate funds	Gainesville	FL 32653							
PURPOSE	(a) Category (S	ee Categories listed at the t	op of this schedule)	(b)	Description				
OF EXPENDITURE	Polling Exp						de of Texas. Com		
EXI ENDITORE					ш		officeholder living		
								Texas Propositions 9	}
					10_11_13_	an	J 17		
Complete ONLY if direct expenditure to benefit C/OI		ceholder name	Office sou	ught			Office he	eld	
Date	Payee name								
10/15/2025	SGS Inc								
		oo. Cit	Chata: Zin Ca	l -					
Amount (\$)	Payee addre		State; Zip Co	oue					
\$2,165.00	6211 NW 1	32na St							
X Expenditure from corporate funds	Gainesville	FL 32653							
				<i>a</i> >					
PURPOSE OF		ee Categories listed at the t	op of this schedule)	(b)	Description	otoi	de of Texas. Com	oloto Cobodulo T	
EXPENDITURE	Advertising	Expense			ш		officeholder living		
					ш			Propositions 9 10 1	1
					13_ and 17	00.	<b>Sport O. 1711</b>		
Complete Chill V if all	Condition 100		O#:	ا داده			O#: !	.i.d	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name	Office sou	ugnt			Office he	eiu	
3poa.a.a to bonom 0/01	-								

# 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 Committe 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	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: Sch: 2/3 Rpt: 10/18	2 FILER NAME Texas REALTORS Issues Political Action Committee 3 Filer ID (Ethics Commission Filers) 00050632
4 Date	5 Payee name
10/15/2025	SGS Inc
10/15/2025	363 IIIC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,165.00	6211 NW 132nd St
X Expenditure from corporate funds	Gainesville, FL 32653
— corporate failus	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Web page supporting the Collin Co Election to confirm creation of Emergency Svcs Dist No 1
	Committee Causing of Emergency Sves bist No 1
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<del>1</del>
Date	Payee name
10/15/2025	SGS Inc
Amount (\$)	Payee address; City; State; Zip Code
\$2,235.63	6211 NW 132nd St
X Expenditure from corporate funds	Gainesville, FL 32653
PURPOSE	
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 travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Digital Ads supporting the Collin Co Election to
	confirm creation of Emergency Svcs Dist No 1
0 1: 0 1 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
oxponditure to senent ere	
Date	Payee name
10/15/2025	SGS Inc
Amount (\$)	Payee address; City; State; Zip Code
\$189.44	6211 NW 132nd St
Ψ109.44	0211 NW 132Nd 3t
Expenditure from	
corporate funds	Gainesville, FL 32653
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Cell phone data supporting Collin Co Election to
	confirm creation of Emergency Svcs Dist No 1
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

# 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
OTHER (other a cottographed listed above)

Candidate/Officeholder/Politica Credit Card Payment		Legal Services	Salaries	s/Wage	s/Contract Labor		OTHER (enter a	a category not listed above)
			uide explains how to o	compl	lete this form.			
1 Total pages Schedule F1:	2 FILER NAME	Ξ				3	Filer ID	(Ethics Commission Filers)
Sch: 3/3 Rpt: 11/18	Texas REA	LTORS Issues F	Political Action Co	mmit	ttee		00050632	
4 Date	5 Payee name							
10/15/2025	SGS Inc							
6 Amount (\$)	7 Payee addre	ss; City;	State; Zip (	Code				
\$106,747.45	6211 NW 1	32nd St						
X Expenditure from corporate funds	Gainesville,	, FL 32653						
8 PURPOSE		ee Categories listed at tl	ne ton of this schedule)	(b)	Description			
OF	Advertising		ie top of this schedule)	`	:	outs	ide of Texas. Con	mplete Schedule T.
EXPENDITURE	7 10 7 2 1 1 2 1 1 2	_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Check if Austin	ı, TX	, officeholder livin	g expense
						su	pport of Be	xar County Propositions
					& B			
9 Complete ONLY if direct		ceholder name	Office so	ought			Office h	eld
expenditure to benefit C/O	н							
Date	Payee name							
10/15/2025	SGS Inc							
Amount (\$)	Payee addre	ss; City;	State; Zip (	Code				
\$6,736.11	6211 NW 1	32nd St						
X Expenditure from corporate funds	Gainesville,	, FL 32653						
PURPOSE	(a) Category (S	ee Categories listed at tl	ne top of this schedule)	(b)	Description			
OF EXPENDITURE	Advertising		,		Check if travel	outs	ide of Texas. Con	mplete Schedule T.
EXPENDITORE					ш		, officeholder livin	
					Direct mail in creation of Er			Ilin Co Election to confir
					Cleation of Li	IIIC	igency Svc	5 DISC NO 1
Complete <u>ONLY</u> if direct expenditure to benefit C/O		iceholder name	Office so	ought			Office h	eld
experientare to benefit 6/6								
Date	Payee name							
10/16/2025	SGS Inc							
Amount (\$)	Payee addre	ss; City;	State; Zip (	Code				
\$4,592.90	6211 NW 1	32nd St						
X Expenditure from corporate funds	Gainesville,	, FL 32653						
PURPOSE		ee Categories listed at tl	no ton of this schodule)	(b)	Description			
OF	Advertising		ie top of this schedule)	``		outs	ide of Texas. Con	mplete Schedule T.
EXPENDITURE	, avortioning	Expense			Check if Austin	ı, TX	, officeholder livin	g expense
								of Bexar County
					Propositions	Αa	and B	
Complete ONLY if direct		ceholder name	Office so	ought			Office h	eld
expenditure to benefit C/O	Н							

### **UNPAID INCURRED OBLIGATIONS**

### SCHEDULE F2

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting/Banking Consulting Expense Contributions/ Donations Made B	y -	Fees Food/Beverage Expense Gift/Awards/Memorials Expen	Polling E	xpense	entai Expense	Transportation Travel in Distr Travel Out of	
Candidate/Officeholder/Politica	al Committee	Legal Services	Salaries/	Wages/Cor	ntract Labor		r a category not listed above)
		The Instruction Guide e	xplains how to c	omplete t			
1 Total pages Schedule F2:						3 Filer ID	(Ethics Commission Filers)
Sch: 1/5 Rpt: 12/18	Texas RE	ALTORS Issues Politi	cal Action Cor	nmittee		00050632	2
TOTAL OF UNITEMI	ZED UNPAIC	INCURRED OBLIC	GATIONS			\$	
5 Date	6 Payee nam	е					
10/21/2025	SGS Inc						
7 Amount (\$)	8 Payee add	ess; City;	State; Zip C	ode			
\$22,627.68	6211 NW	132nd St					
Expenditure from corporate funds	Gainesvill	e, FL 32653					
9 TYPE OF EXPENDITURE	X	Political	Non-Po	litical			
10 PURPOSE	(a) Category	(See Categories listed at the top	of this schedule)	(b) Des	scription		
OF EXPENDITURE	Advertisin	g Expense			Check if travel o		omplete Schedule T.
EXPENDITORE					1	TX, officeholder liv	- '
					ext message opositions <i>F</i>		support of Bexar County
11 Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office so	ught		Office	held
<u> </u>							
Date	Payee nam	е					
10/21/2025	SGS Inc						
Amount (\$)	Payee addi	ress; City;	State; Zip C	ode			
\$766.08	6211 NW	132nd St					
X Expenditure from corporate funds	Gainesvill	e, FL 32653					
TYPE OF EXPENDITURE	X	Political	Non-Po	litical			
PURPOSE	(a) Category	(See Categories listed at the top	of this schedule)	(b) Des	scription		
OF EXPENDITURE	Advertisin	g Expense			<u>!</u>		omplete Schedule T.
				<u> </u>	1	TX, officeholder liv	
				to	confirm cre	ation of Eme	oporting Collin Co Election rgency Svcs Dist No 1
Complete <u>ONLY</u> if direct expenditure to benefit C/O		fficeholder name	Office so	ught		Office	held
l							

# **UNPAID INCURRED OBLIGATIONS**

## SCHEDULE F2

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor lains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F2:	2 FILER NAME	·	3 Filer ID (Ethics Commission Filers)
Sch: 2/5 Rpt: 13/18	Texas REALTORS Issues Political	Action Committee	00050632
4 TOTAL OF UNITEMIZ	ZED UNPAID INCURRED OBLIGA	ATIONS	\$
5 Date 10/21/2025	6 Payee name SGS Inc		
7 Amount (\$) \$4,956.97	8 Payee address; City; S 6211 NW 132nd St	State; Zip Code	
Expenditure from corporate funds	Gainesville, FL 32653		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Advertising Expense	Check if travel Check if Austin	outside of Texas. Complete Schedule T.  n, TX, officeholder living expense support of Collin Co Election to confirm mergency Svcs Dist No 1
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 10/21/2025	Payee name SGS Inc		
Amount (\$) \$17,646.24	Payee address; City; S 6211 NW 132nd St	State; Zip Code	
X Expenditure from corporate funds	Gainesville, FL 32653		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of the Advertising Expense	Check if travel Check if Austin	outside of Texas. Complete Schedule T.  n, TX, officeholder living expense es (MMS) in support of TX Propositions .3_ and 17
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

#### UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/5 Rpt: 14/18 Texas REALTORS Issues Political Action Committee 00050632 4 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 10/21/2025 SGS Inc Amount (\$) Payee address; State; Zip Code City; \$171,437.80 6211 NW 132nd St Expenditure from Gainesville, FL 32653 corporate funds **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Direct mail in support of TX Propositions 9 10 11 13\_ and 17 Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/16/2025 SGS Inc Amount (\$) Payee address; City; State; Zip Code \$106,747.45 6211 NW 132nd St

### **UNPAID INCURRED OBLIGATIONS**

## SCHEDULE F2

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense Accounting/Banking Consulting Expense	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	y - Gift/Awards/Memorials Expense	Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
	The Instruction Guide explain	s how to complete this form.	
1 Total pages Schedule F2:			3 Filer ID (Ethics Commission Filers)
Sch: 4/5 Rpt: 15/18	Texas REALTORS Issues Political A	ction Committee	00050632
TOTAL OF UNITEMIX	ZED UNPAID INCURRED OBLIGATI	IONS	\$
5 Date 10/16/2025	6 Payee name SGS Inc		
7 Amount (\$)	8 Payee address; City; Stat	te; Zip Code	
\$4,956.97	6211 NW 132nd St		
Expenditure from corporate funds	Gainesville, FL 32653		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF	(a) Category (See Categories listed at the top of this s		
EXPENDITURE	Advertising Expense	I <u>—</u>	outside of Texas. Complete Schedule T.
			support of Collin Co Election to confirm mergency Svcs Dist No 1
11 Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/O	Н		
Date	Payee name		
10/09/2025	SGS Inc		
Amount (\$) \$316,070.63	Payee address; City; State 6211 NW 132nd St	te; Zip Code	
X Expenditure from corporate funds	Gainesville, FL 32653		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF	(a) Category (See Categories listed at the top of this s		
EXPENDITURE	Advertising Expense	<u>                                    </u>	outside of Texas. Complete Schedule T.  1, TX, officeholder living expense
			tising in support of TX Propositions 9_
		10_11_13_	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

#### UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 5/5 Rpt: 16/18 Texas REALTORS Issues Political Action Committee 00050632 4 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 10/09/2025 SGS Inc Amount (\$) Payee address; City; State; Zip Code \$243,955.70 6211 NW 132nd St Expenditure from Х Gainesville, FL 32653 corporate funds TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Advertising Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Direct mail in support of TX Propositions 9\_ 10\_ 11\_ 13\_ and 17 Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH

# PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instr	uction Guide explains how to complete this form.	1 Total pages Schedule F3: Sch: 1/1 Rpt: 17/18
2 FILER NAME Texas REALTOR	S Issues Political Action Committee	3 Filer ID (Ethics Commission Filers) 00050632
4 Date 10/01/2025	<ul> <li>5 Name of person from whom investment is purchased Frost Bank</li> <li>6 Address of person from whom investment is purchased; City; P.O. Box 1727 Austin, TX 78767</li> <li>7 Description of investment Purchased 3,010.24 units of Invesco Stit Treasury</li> <li>8 Amount of investment (\$)</li> <li>3,010.24</li> </ul>	State; Zip Code
Date 10/21/2025	Name of person from whom investment is purchased Frost Bank  Address of person from whom investment is purchased; City; P.O. Box 1727  Austin, TX 78767  Description of investment Purchased 1,500 units of Invesco Stit Treasury  Amount of investment (\$) 1,500.00	State; Zip Code

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 18/18 2 FILER NAME Filer ID (Ethics Commission Filers) Texas REALTORS Issues Political Action Committee 00050632 8 Amount (\$) Date 5 Name of person from whom amount is received 10/01/2025 Frost Bank \$3,382.29 6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78767 Purpose for which amount is received Check if political contribution returned to filer Cash dividend received on Invesco Stit Treasury