#### 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) 00084872 3 COMMITTEE NAME **OFFICE USE ONLY** Parkhill PAC Date Received **ELECTRONICALLY FILED** 11/04/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 4222 85th Street Lubbock, TX 79423 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Mr. Brian NAME Date Processed **NICKNAME** LAST **SUFFIX** Date Imaged Irlbeck CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE TREASURER 4222 85th St. STREET **ADDRESS** (Residence or Business) Lubbock, TX 79423 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 4222 85th St. MAILING **ADDRESS** Lubbock, TX 79423 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (806) 473-3581 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 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 09/26/2025 10/25/2025

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## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

			-		
2 COMMITTEE NAME Parkhill PAC			1	L3 Filer ID 00084872	(Ethics Commission Filers)
	14 0 11 1	I. O			
4 COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain		B. Opposed			
paper to complete this report if necessary.)		В. Оррозси			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	O POLITICAL CONTRIBUTION GUARANTEES OF LO IADE ELECTRONICALLY) qualifies for the higher itemizat	ANS, OR	\$	0.00
	2. TOTAL POLITICA	·		\$	0.00
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURES			\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	1,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			DAY \$	24,310.32
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			HE \$	0.00
6 AFFIDAVIT				<u> </u>	
		true and corr	ffirm, under penalty of perj ect and includes all inform 5, Election Code.	jury, that the a	accompanying report is d to be reported by me
			Mr. Briar	n Irlbeck	
			Signature of Carr	npaign Treasu	ırer
AFFIX NOTAF	RY STAMP / SEAL ABOVE				
Sworn to and subscribe	ed before me, by the said		, thi	is the	day
	, 20, to certify \				
Signature of officer	administering oath	Printed name of officer adn	ninistering oath	Title of office	cer administering oath

### **SUBTOTALS - MPAC**

# FORM MPAC COVER SHEET PG 3

				3 of 6	
17 COMMITT	(Ethics Commission Filers)				
19 SCHEDUL NAME OF	SUBTOTAL AMOUNT				
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	0.00		
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00		
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00		
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	\$			
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION				
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	\$			
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	9. X SCHEDULE E: LOANS				
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	\$	1,000.00		
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00		
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	\$	0.00		
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00		
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	\$			
15.	\$				

PLE	DGED CONTRIBU	TIONS			SCHEDULE I	В		
The Instruction Guide explains how to complete this form.				1	Total pages Schedule B: Sch: 1/1 Rpt: 4/6			
2 FILER NAME Parkhill PAC			3	Filer ID (Ethics Commission Filers) 00084872				
4 TOTAL	. OF UNITEMIZED PLED	GES			\$	0.00		
<b>5</b> Date	<ul><li>6 Full name of pledgor</li><li>7 Pledgor Address;</li></ul>	out-of-state PAC (ID#		8	Amount of pledge (\$)			
			1	]	Check if travel outside of Texas. Complete Sche	dule T.		
<b>10</b> Principal	occupation / Job title (See Instru	uctions)	11 Employer (See Ins	structi	ons)			

LOANS	SCHEDULE E
The Instruction Guide explains how to complete this form	1 Total pages Schedule E: Sch: 1/1 Rpt: 5/6
2 FILER NAME Parkhill PAC	3 Filer ID (Ethics Commission Filers) 00084872
TOTAL OF UNITEMIZED LOANS	\$ 0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID:	#: <b>9</b> 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 f	Employer (See Instructions)
14 Description of Collateral 15 0 None	Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION 17 Name of guarantor	19 Amount Guaranteed (\$)
not applicable 18 Guarantor address; City; State;	Zip Code
20 Principal occupation 21 I	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 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/V	/ages	/Contract Labor		OTHER (enter a	a category not listed above)
		The Instruction Guide	explains how to co	mple	ete this form.			
1 Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
Sch: 1/1 Rpt: 6/6	Parkhill PA						00084872	
4 Date	5 Payee name							
10/03/2025	1	rner for Texas Hoເ	ıszxe					
6 Amount (\$)	7 Payee addre	ss; City;	State; Zip Co	de				
\$500.00	2201 Spink	s Rd Ste. 250						
Expenditure from corporate funds	Flower Mou	nt, TX 75022						
8 PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description			
OF		s/Donations Made				outsi	de of Texas. Con	nplete Schedule T.
EXPENDITURE		Officeholder/Politica			Check if Austin,	, TX,	officeholder livin	g expense
					Contribution			
Complete ONLY if direct expenditure to benefit C/O		ceholder name	Office sou	ght			Office h	eld
Date	Payee name							
10/03/2025	1	Trent Ashby						
			State; Zip Co	do				
Amount (\$)	Payee addre		State, Zip Co	ue				
\$500.00	P.O. Box 4:	.2						
- Cynanditura fram								
Expenditure from corporate funds	Lufkin, TX 7	'5902						
PURPOSE	(a) Category (c	ee Categories listed at the to		(b)	Description			
OF	1	ee Categories listed at the to ns/Donations Made		(~)	:	outsi	de of Texas. Con	nplete Schedule T.
EXPENDITURE		Officeholder/Politica			ш		officeholder livin	
		J	• • • • • • • • • • • • • • • • • •		Contribution			
Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	aht			Office h	old
expenditure to benefit C/O		centitien name	Office 300	grit			Office fi	Ciu
'								