

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00086617	2 Total pages filed: 14	
3 COMMITTEE NAME Cornerstone Government Affairs Texas PAC			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 800 Maine Avenue, SW Floor 7 Washington, DC 20024			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Hassan A. NICKNAME LAST SUFFIX Tony Essalih			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1800 West Loop South, Suite 1250 Houston, TX 77027			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1800 West Loop South, Suite 1250 Houston, TX 77027			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 449-0945			
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff			
10 PERIOD COVERED	Month Day Year Month Day Year 07/01/2025 THROUGH 12/31/2025			
11 ELECTION	ELECTION DATE Month Day Year 11/03/2026		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Cornerstone Government Affairs Texas PAC		13 Filer ID (Ethics Commission Filers) 00086617	
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 Jared Patterson State Representative	
15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input checked="" 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)	\$ 3,262.32	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00	
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,000.00	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 4,590.00	
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. Hassan A. Essalih _____ 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>			

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

Page 3 of 14

12 COMMITTEE NAME Cornerstone Government Affairs Texas PAC		13 Filer ID (Ethics Commission Filers) 00086617
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 Lauren Ashley Simmons
	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.)		
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.)	The Honorable Kenneth King State Representative

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

Page 4 of 14

12 COMMITTEE NAME Cornerstone Government Affairs Texas PAC	13 Filer ID (Ethics Commission Filers) 00086617
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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 Emilio DeAyala State Representative

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 John Whitmire Houston City Mayor

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
5 of 14

17 COMMITTEE NAME Cornerstone Government Affairs Texas PAC		18 Filer ID 00086617	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	2,550.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$	400.00
6.	<input checked="" type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$	312.32
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 type="checkbox"/> SCHEDULE E: LOANS	\$	
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	5,000.00
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	60.00
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: 1/4 Rpt: 6/14
2 FILER NAME Cornerstone Government Affairs Texas PAC		3 Filer ID (Ethics Commission Filers) 00086617
4 Date 11/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Laura (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) Cornerstone Government Affairs, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Laura (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77009	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Cornerstone Government Affairs, Inc.
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Chris (Mr.) <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30305	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Cornerstone Government Affairs, Inc.
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Chris (Mr.) <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30305	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Cornerstone Government Affairs, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Chris (Mr.) <hr/> Contributor address; City; State; Zip Code Atlanta, GA 30305	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Cornerstone Government Affairs, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/4 Rpt: 7/14
2 FILER NAME Cornerstone Government Affairs Texas PAC		3 Filer ID (Ethics Commission Filers) 00086617
4 Date 10/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Chris (Mr.) 6 Contributor address; City; State; Zip Code Atlanta, GA 30305	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) Cornerstone Government Affairs, Inc.
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Chris (Mr.) Contributor address; City; State; Zip Code Atlanta, GA 30305	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Cornerstone Government Affairs, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carpenter, Chris (Mr.) Contributor address; City; State; Zip Code Atlanta, GA 30305	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Cornerstone Government Affairs, Inc.
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chevalier, Felix (Mr.) Contributor address; City; State; Zip Code Houston, TX 77021	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Senior Consultant		Employer (See Instructions) Cornerstone Government Affairs
Date 07/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Alice (Mrs.) Contributor address; City; State; Zip Code Takoma Park, MD 20912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Cornerstone Government Affairs, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/4 Rpt: 8/14
2 FILER NAME Cornerstone Government Affairs Texas PAC		3 Filer ID (Ethics Commission Filers) 00086617
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Alice (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Takoma Park, MD 20912	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) Cornerstone Government Affairs, Inc.
Date 08/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Alice (Mrs.) <hr/> Contributor address; City; State; Zip Code Takoma Park, MD 20912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Cornerstone Government Affairs, Inc.
Date 10/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Alice (Mrs.) <hr/> Contributor address; City; State; Zip Code Takoma Park, MD 20912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Cornerstone Government Affairs, Inc.
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Alice (Mrs.) <hr/> Contributor address; City; State; Zip Code Takoma Park, MD 20912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Cornerstone Government Affairs, Inc.
Date 10/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Alice (Mrs.) <hr/> Contributor address; City; State; Zip Code Takoma Park, MD 20912	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Cornerstone Government Affairs, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/4 Rpt: 9/14
2 FILER NAME Cornerstone Government Affairs Texas PAC		3 Filer ID (Ethics Commission Filers) 00086617
4 Date 12/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazuca, Anne (Ms.) <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78748	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) Cornerstone Government Affairs, Inc.

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule C2:
Sch: 1/1 Rpt: 10/14

2 FILER NAME

Cornerstone Government Affairs Texas PAC

3 Filer ID (Ethics Commission Filers)
00086617

4 Date
12/31/2025

5 Corporation / Labor Organization name
Cornerstone Government Affairs, Inc.

6 Corporation / Labor Organization address; City; State; Zip Code

Washington , DC 20024

7 Amount of contribution(\$)
\$400.00

8 In-kind contribution description
Staff time (bank reconciliation, check preparation, campaign finance report

☐ Check if travel outside of Texas. Complete Schedule T.

MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C3: Sch: 1/1 Rpt: 11/14
2 FILER NAME Cornerstone Government Affairs Texas PAC		3 Filer ID (Ethics Commission Filers) 00086617
4 Date 09/25/2025	5 Corporation / Labor Organization name Cornerstone Government Affairs, Inc.	6 Amount (\$) 28.33
Date 10/15/2025	Corporation / Labor Organization name Cornerstone Government Affairs, Inc.	Amount (\$) 85.93
Date 10/20/2025	Corporation / Labor Organization name Cornerstone Government Affairs, Inc.	Amount (\$) 90.16
Date 10/30/2025	Corporation / Labor Organization name Cornerstone Government Affairs, Inc.	Amount (\$) 44.10
Date 12/03/2025	Corporation / Labor Organization name Cornerstone Government Affairs, Inc.	Amount (\$) 46.40
Date 12/15/2025	Corporation / Labor Organization name Cornerstone Government Affairs, Inc.	Amount (\$) 17.40

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: 1/2 Rpt: 12/14	2 FILER NAME Cornerstone Government Affairs Texas PAC	3 Filer ID (Ethics Commission Filers) 00086617
4 Date 10/20/2025	5 Payee name David Cook Campaign	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 309 E. Broad Street Mansfield, TX 76063	
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 Political contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2025	Payee name Jared Patterson Campaign	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4412 Sapphire Dr Frisco, TX 75034	
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 Political contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2025	Payee name John Whitmire Campaign	
Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 41964 Houston, TX 77241	
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 Political contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 2/2 Rpt: 13/14	2 FILER NAME Cornerstone Government Affairs Texas PAC	3 Filer ID (Ethics Commission Filers) 00086617
4 Date 10/30/2025	5 Payee name Ken King Campaign	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 1202 Candian, TX 79014-1202	
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 Political contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2025	Payee name Lauren Simmons Campagin	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO 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 Political contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/03/2025	Payee name Mano DeAyala Campaign	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12335 Kingsride Lane #416 Houston, TX 77024	
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 Political contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Cornerstone Government Affairs Texas PAC	3 Filer ID (Ethics Commission Filers) 00086617
4 Date 07/10/2025	5 Payee name Founders Bank	
6 Amount (\$) 30.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 5101 Wisconsin Ave., NW Suite 400 Washington, DC 20016	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Stop payment charge
Date 08/06/2025	Payee name Founders Bank	
Amount (\$) 30.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 5101 Wisconsin Ave., NW Suite 400 Washington, DC 20016	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Stop payment charge