

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) 00017315	2 Total pages filed: 4	
3 COMMITTEE NAME HOME PAC of the HBA of Greater Dallas			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 08/02/2024 RECEIVED 2024 AUG -2 PM 2: 56 Date Hand-delivered or Date Postmarked CITY SECRETARY DALLAS, TEXAS Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 5816 W. Plano Pkwy. #101 Plano, TX 75093-4636			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST David NICKNAME LAST Lehde	MI SUFFIX		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5816 West Plano Parkway Plano, TX 75093			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5816 West Plano Parkway Plano, TX 75093			
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly		<input type="checkbox"/> 10th day after campaign treasurer termination	
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5		<input type="checkbox"/> April 5	
	<input type="checkbox"/> February 5		<input type="checkbox"/> May 5	
	<input type="checkbox"/> March 5		<input type="checkbox"/> June 5	
	<input type="checkbox"/> July 5		<input type="checkbox"/> October 5	
	<input type="checkbox"/> August 5		<input type="checkbox"/> November 5	
	<input type="checkbox"/> September 5		<input type="checkbox"/> December 5	
11 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year	
	06/26/2024		07/25/2024	

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

**FORM MPAC
COVER SHEET PG 2**

12 COMMITTEE NAME HOME PAC of the HBA of Greater Dallas		13 Filer ID (Ethics Commission Filers) 00017315
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.)	
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	\$ 60.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 60.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,015.04
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 33,104.13
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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.

David Lehde
Signature of Campaign Treasurer

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 administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - MPAC

FORM MPAC
COVER SHEET PG 3
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17 COMMITTEE NAME HOME PAC of the HBA of Greater Dallas		18 Filer ID 00017315	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS			SUBTOTAL AMOUNT
NAME OF SCHEDULE			
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	60.00
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 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 type="checkbox"/> SCHEDULE E: LOANS	\$	
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	5,015.04
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 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	\$	

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: 4/4
2 FILER NAME: HOME PAC of the HBA of Greater Dallas
3 Filer ID (Ethics Commission Filers): 00017315

4 Date: 07/02/2024
5 Payee name: Authorize.net

6 Amount (\$): \$15.04
7 Payee address; City; State; Zip Code: PO Box 947, American Fork, UT 84003
Expenditure from corporate funds checkbox

8 PURPOSE OF EXPENDITURE: (a) Category: Fees; (b) Description: Credit card fees, Check if travel outside of Texas, Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH: Candidate/Officeholder name, Office sought, Office held

Date: 07/12/2024
Payee name: HOME PAC of the Texas Association of Builders

Amount (\$): \$5,000.00
Payee address; City; State; Zip Code: 313 E. 12th, Suite 210, Austin, TX 78701
Expenditure from corporate funds checkbox

PURPOSE OF EXPENDITURE: (a) Category: Contributions/Donations Made By Candidate/Officeholder/Political Committee; (b) Description: Contribution, Check if travel outside of Texas, Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH: Candidate/Officeholder name, Office sought, Office held

Empty section for additional expenditure entries.