

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM **SPAC**
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.

1 Filer ID
(Ethics Commission Filers)
00081476

2 Total pages filed:
9

3 COMMITTEE NAME
Yes For Northwest

OFFICE USE ONLY

Date Received
ELECTRONICALLY FILED
07/06/2023

4 COMMITTEE
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
PO Box 1322
Roanoke, TX 76262

Change of Address

Date Hand-delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

5 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
Mrs. Michelle L.

NICKNAME LAST SUFFIX
Lunday

6 CAMPAIGN
TREASURER
STREET
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
2810 Castlereach Street
Trophy Club, TX 76262

(Residence or Business)

7 CAMPAIGN
TREASURER
MAILING
ADDRESS

STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
PO Box 1322
Roanoke, TX 76262

Change of Address

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(972) 897-8383

9 REPORT
TYPE

January 15 30th day before election Exceeded modified reporting limit
 July 15 8th day before election Dissolution (Attach PAC-DR)
 Runoff 10th day after campaign treasurer termination

10 PERIOD
COVERED

Month Day Year THROUGH Month Day Year
04/27/2023 THROUGH 06/30/2023

11 ELECTION

ELECTION DATE
Month Day Year
05/06/2023

ELECTION TYPE

Primary Runoff Other
 General Special

GO TO PAGE 2

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **SPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Yes For Northwest		13 Filer ID (Ethics Commission Filers) 00081476
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME _____ OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder) _____
	<input checked="" type="checkbox"/> Measure	BALLOT IDENTIFICATION / # _____ ELECTION DATE Month Day Year 05/06/2023
		DESCRIPTION Northwest ISD Proposition A
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 15,100.01
	4. TOTAL POLITICAL EXPENDITURES	\$ 30,200.02
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 22,657.51
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.

_____ Mrs. Michelle L. Lunday
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

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE

FORM SPAC
ADDENDUM

Page 3 of 9

12 COMMITTEE NAME Yes For Northwest	13 Filer ID (Ethics Commission Filers) 00081476
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14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME <hr/> OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)						
	<input checked="" type="checkbox"/> MEASURE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%; padding: 2px;">BALLOT IDENTIFICATION</td> <td style="width:30%; padding: 2px;">ELECTION DATE</td> </tr> <tr> <td style="padding: 2px;"></td> <td style="padding: 2px;">MONTH DAY YEAR</td> </tr> <tr> <td style="padding: 2px;"></td> <td style="padding: 2px;">05/06/2023</td> </tr> </table>	BALLOT IDENTIFICATION	ELECTION DATE		MONTH DAY YEAR		05/06/2023
	BALLOT IDENTIFICATION	ELECTION DATE						
	MONTH DAY YEAR							
	05/06/2023							
DESCRIPTION Northwest ISD Proposition B								

COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholders only)	<input type="checkbox"/> CANDIDATE <input type="checkbox"/> OFFICE HOLDER	CANDIDATE / OFFICE HOLDER NAME <hr/> OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)						
	<input checked="" type="checkbox"/> MEASURE	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%; padding: 2px;">BALLOT IDENTIFICATION</td> <td style="width:30%; padding: 2px;">ELECTION DATE</td> </tr> <tr> <td style="padding: 2px;"></td> <td style="padding: 2px;">MONTH DAY YEAR</td> </tr> <tr> <td style="padding: 2px;"></td> <td style="padding: 2px;">05/06/2023</td> </tr> </table>	BALLOT IDENTIFICATION	ELECTION DATE		MONTH DAY YEAR		05/06/2023
	BALLOT IDENTIFICATION	ELECTION DATE						
	MONTH DAY YEAR							
	05/06/2023							
DESCRIPTION Northwest ISD Proposition C								

SUBTOTALS - SPAC

17 COMMITTEE NAME Yes For Northwest		18 Filer ID (Ethics Commission Filers) 00081476
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 0.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 2,500.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 30,200.02
9.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
11.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
12.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
14.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: Sch: 1/1 Rpt: 5/9	
2 FILER NAME Yes For Northwest		3 Filer ID (Ethics Commission Filers) 00081476	
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of pledge (\$)	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/1 Rpt: 6/9
2 FILER NAME Yes For Northwest		3 Filer ID (Ethics Commission Filers) 00081476
4 Date 05/11/2023	5 Corporation / Labor Organization name Teague Nall & Perkins	7 Amount of contribution (\$) \$2,500.00
	6 Corporation / Labor Organization address; City; State; Zip Code Fort Worth, TX 76137	

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: 1/3 Rpt: 7/9	2 FILER NAME Yes For Northwest	3 Filer ID (Ethics Commission Filers) 00081476
4 Date 05/01/2023	5 Payee name First Financial Bank	
6 Amount (\$) \$5.00	7 Payee address; City; State; Zip Code 95 Trophy Club Drive Trophy Club, TX 76262	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Bank Fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2023	Payee name First Financial Bank	
Amount (\$) \$5.00	Payee address; City; State; Zip Code 95 Trophy Club Drive Trophy Club, TX 76262	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly Bank Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/08/2023	Payee name Foster Paredes, LLC	
Amount (\$) \$7,500.00	Payee address; City; State; Zip Code 3707 Shelby Drive Fort Worth, TX 76109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Faith Based Initiative
Complete ONLY 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: 2/3 Rpt: 8/9	2 FILER NAME Yes For Northwest	3 Filer ID (Ethics Commission Filers) 00081476
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4 Date 05/08/2023	5 Payee name Murphy NASICA
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6 Amount (\$) \$4,122.16	7 Payee address; City; State; Zip Code PO Box 1648 Austin, TX 78767
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election Day Texting
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/29/2023	Payee name Premier Mobile Billboards
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Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 1408 N Riverfront Blvd Suite 276 Dallas, TX 75207
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mobile Billboard on May 1, 2023 and May 5, 2023 - Deposit
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/02/2023	Payee name Premier Mobile Billboards
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Amount (\$) \$650.00	Payee address; City; State; Zip Code 1408 N Riverfront Blvd Suite 276 Dallas, TX 75207
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mobile Billboard on May 1, 2023 and May 5, 2023 - Deposit
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 3/3 Rpt: 9/9	2 FILER NAME Yes For Northwest	3 Filer ID (Ethics Commission Filers) 00081476	
4 Date 05/12/2023	5 Payee name Tom Thumb		
6 Amount (\$) \$317.85	7 Payee address; City; State; Zip Code 101 Trophy Lake Drive Trophy Club, TX 76262		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reels contest expense. 3 winners of \$100 gift card	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held