#### FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00080619 3 COMMITTEE NAME **OFFICE USE ONLY** Charter Schools Now PAC Date Received **ELECTRONICALLY FILED** 07/17/2023 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 3005 S. Lamar Blvd Date Hand-delivered or Date Postmarked Suite D109 #250 Change of Address Austin, TX 78704 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Rex NAME NICKNAME LAST **SUFFIX** Gore STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1304 W. Oltorf St. STREET **ADDRESS** (Residence or Business) Austin, TX 78704 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 3005 S. Lamar Blvd MAILING **ADDRESS** Suite D109 #250 Austin, TX 78704 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 694-7777 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 06/01/2023 06/30/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Charter Schools Now	PAC		00080619	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Jeanette Martinez Fort Worth	City Council	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	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	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) t qualifies for the higher itemization threshold	\$	0.00
		AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	65,226.85
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	398.10
	4. TOTAL POLITICA	AL EXPENDITURES	\$	9,395.11
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST IG PERIOD	DAY \$	184,092.91
OUTSTANDING LOAN TOTALS	l .	AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Rex	Gore	
		Signature of Ca	mpaign Treas	ırer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said _	, ti	his the	day
		which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of offi	cer administering oath

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

## FORM GPAC ADDENDUM

Page 3 of 13

						1 490 0 01 10
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Charter Schools Now Pa	AC			00080619	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Sukh Kaur San Antonio City Co	uncil	
	(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			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Elizabeth Campos State Repres	sentative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Enzabeth Campos State Repres	Scritative	
	(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			
		3. 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	Terry Leo Wilson State Represe	entative	
	(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			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
		1	l			

## **SUBTOTALS - GPAC**

# FORM GPAC COVER SHEET PG 3

			•	4	of 13
		EE NAME chools Now PAC	<b>18</b> Filer ID 00080619	(Ethics Commission Fi	ilers)
l		E SUBTOTALS SCHEDULE		SUBTOTAL AMO	 OUNT
		SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>.</b> 65	
1.	<u> </u>	SCHEDULE AT. MONETART POLITICAL CONTRIBUTIONS		\$ 65	5,226.85
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	DRGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	5	\$	9,395.11
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
I					

	MONEI	ARY POLITICAL CO	ONTRIBUTION	15		SCHEDULE A1
	The Instruc	ction Guide explains how t	m.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 5/13	
2	FILER NAME Charter Scho	ools Now PAC			3	Filer ID (Ethics Commission Filers) 00080619
4	Date 06/13/2023	<ul> <li>5 Full name of contributor</li> <li>Boyar, J. William</li> <li>6 Contributor address; City; Stat</li> </ul>	7	Amount of Contribution (\$) \$20,000.00		
8	Principal occu Founding Sh		9	Employer (See Instructions BoyarMiller	)	
	Date 06/27/2023	Full name of contributor  Brown, Onjaleke  Contributor address; City; Stat	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$) \$26.27
	Principal occur Superintende	pation / Job title (See Instructions) ent		Employer (See Instructions St. Anthony School	)	
	Date 06/13/2023	Full name of contributor  Good Government Fund  Contributor address; City; Stat	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$) \$20,000.00
	Principal occu	Fort Worth, TX 76102 pation / Job title (See Instructions)		Employer (See Instructions	)	
	Date 06/28/2023	Full name of contributor  Greenberg, Joseph (Mr.)  Contributor address; City; Stat  Houston, TX 77005	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$) \$25,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Alta Resources	)	
	Date 06/28/2023	Full name of contributor  Luna, Nadia  Contributor address; City; Stat  Manchaca, TX 78652	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$) \$100.00
		pation / Job title (See Instructions) er Engagement		Employer (See Instructions TPCSA	)	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/2 Rpt: 6/13	
2	FILER NAME Charter Sch	ools Now PAC		3	Filer ID (Ethics Commission 00080619	n Filers)
4	Date 06/04/2023	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Mitchell, Julia</li> <li>Contributor address; City; State; Zip Code</li> </ul>	7	Amount of Contribution (\$)	\$10.73	
8	Principal occu	Austin, TX 78748  upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
-		tor of Donor Relations	TPCSA	-,		
	Date 06/07/2023	Full name of contributor out-of-state PAC (ID#:_ Mitchell, Julia Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1.35
		Austin, TX 78748  Ipation / Job title (See Instructions)  etor of Donor Relations	Employer (See Instructions	<u> </u> S)		
	Date	Full name of contributor out-of-state PAC (ID#:_	TPCSA	_	Amount of Contribution (\$)	
	06/07/2023	Wilson, Meg  Contributor address; City; State; Zip Code		•	, another of Continuation (C)	\$62.23
		Austin, TX 78704				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	s)		
	Date 06/07/2023	Full name of contributor out-of-state PAC (ID#:_ Wright, Julia Contributor address; City; State; Zip Code Rosharon, TX 77583			Amount of Contribution (\$)	\$26.27
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Superintend	ent	MeyerPark			

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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	I 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/7 Rpt: 7/13	Charter Schools Now PAC 00080619
4 Date	5 Payee name
06/05/2023	CallHub
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$50.00	1811 Silverside Rd.
Expenditure from corporate funds	Wilmington, DE 19810
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
	Message Phone Calls, Texting Service
	Message Frone Sails, Fexting Service
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	·
06/05/2023	Payee name CallHub
Amount (\$)	Payee address; City; State; Zip Code
\$50.00	1811 Silverside Rd.
Expenditure from	
corporate funds	Wilmington, DE 19810
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Message Phone Calls, Texting Service
	Message Frione Cails, Texting Service
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	-
Date 06/05/2023	Payee name CallHub
Amount (\$)	Payee address; City; State; Zip Code
\$50.00	1811 Silverside Rd.
Expenditure from	
corporate funds	Wilmington, DE 19810
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  Message Phone Calls, Texting Service
	iviessage Friorie Calls, Textilig Service
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
	Carry whomo Only Courion Diotriot

### 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 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)

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1: Sch: 2/7 Rpt: 8/13	: 2 FILER NAME Charter Schools Now PAC  3 Filer ID (Ethics C 00080619	ommission Filers)
4 Date 06/05/2023	5 Payee name CallHub	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 1811 Silverside Rd.	
Expenditure from corporate funds	Wilmington, DE 19810	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Message Phone Calls, Texting Servi	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held Fort Worth City Council District	
Date 06/09/2023	Payee name CallHub	
Amount (\$) \$25.00	Payee address; City; State; Zip Code  1811 Silverside Rd.	
Expenditure from corporate funds	Wilmington, DE 19810	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Message Phone Calls, Texting Servi	
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held  OH Martinez, Jeanette Fort Worth City Council District	
Date 06/09/2023	Payee name CallHub	
Amount (\$) \$25.00	Payee address; City; State; Zip Code  1811 Silverside Rd.	
Expenditure from corporate funds	Wilmington, DE 19810	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Message Phone Calls, Texting Servi	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held  OH Kaur, Sukh San Antonio City Council District	

#### SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 3/7 Rpt: 9/13	Charter Schools Now PAC 00080619					
4 Date	5 Payee name					
06/09/2023	CallHub					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$50.00	1811 Silverside Rd.					
Expenditure from corporate funds	Wilmington, DE 19810					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense					
	Message Phone Calls, Texting Service					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OH Kaur, Sukh San Antonio City Council District						
Date	Payee name					
06/09/2023	CallHub					
Amount (\$)	Payee address; City; State; Zip Code					
\$50.00	1811 Silverside Rd.					
Evponditure from						
Expenditure from corporate funds	Wilmington, DE 19810					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Advertising Expense					
	Check if Austin, TX, officeholder living expense  Mossage Phone Calls, Texting Service					
	Message Phone Calls, Texting Service					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OI						
Date		_				
06/26/2023	Payee name Elizabeth "Liz" Campos Campaign					
	7 - 7					
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 1028 Rigsby					
ΦΖ,5UU.UU	TOZO NIGSDY					
Expenditure from corporate funds	San Antonio, TX 78210					
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense					
	Candidate/Onicenoider/Political Committee Campaign Contribution					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OI	<del>'</del>					

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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)

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/7 Rpt: 10/13	Charter Schools Now PAC	00080619
4 Date	5 Payee name	<u> </u>
06/13/2023	Facebook	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$378.66	1 Hacker Way	
Expenditure from corporate funds	Menlo Park, CA 94022	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Political Advertising
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	Lught Office held
expenditure to benefit C/OI		onio City Council District
Date		,
06/13/2023	Payee name Facebook	
		odo
Amount (\$) \$245.45	Payee address; City; State; Zip Co	oue
φ245.45	I Hacker Way	
Expenditure from corporate funds	Menlo Park, CA 94022	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Political Advertising
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught Office held
expenditure to benefit C/OI	H Martinez, Jeanette Fort Wo	rth City Council District
Date	Payee name	
06/15/2023	Prosperity Bank	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$147.50	1610 W North Loop Blvd	
X Expenditure from corporate funds	Austin, TX 78756-2007	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE		Check if Austin, TX, officeholder living expense
		Bank Service Fee
Complete ONLY if direct	Candidate/Officeholder name Office sou	Light Office held
expenditure to benefit C/OI		Onice Held

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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	I 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/7 Rpt: 11/13	Charter Schools Now PAC 00080619
4 Date	5 Payee name
06/09/2023	Regions Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$57.00	4314 West Braker Lane
Expenditure from	
corporate funds	Austin, TX 78759
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Bank Service Fee
	Daily Service Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/09/2023	Regions Bank
	· ·
Amount (\$)	Payee address; City; State; Zip Code
\$47.00	4314 West Braker Lane
Expenditure from	
corporate funds	Austin, TX 78759
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Bank Service Fee
	Bank Service 1 cc
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/29/2023	Regions Bank
	5
Amount (\$)	
\$15.00	4314 West Braker Lane
X Expenditure from	
corporate funds	Austin, TX 78759
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Bank Service Fee
	25 5555 / 65
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(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 Credit Card Payment	
4. Total manage Calcadate 54	
1 Total pages Schedule F1:	
Sch: 6/7 Rpt: 12/13	Charter Schools Now PAC 00080619
4 Date	5 Payee name
06/05/2023	RightSide Compliance LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$900.00	PO Box 341027
Expenditure from	Austin, TX 78734
corporate funds	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Consulting Foregoese Complete Schedule T
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Compliance Consulting
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/01/2023	SchoolForward LLC
Amount (\$)	Payee address; City; State; Zip Code
\$3,000.00	6 Knob Hill
Expenditure from corporate funds	Park City, UT 84098
PURPOSE	,
OF	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Graphics design and weekly reporting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payao namo
Date 06/20/2023	Payee name Terri Leo Wilson Campaign
06/29/2023	Terri Leo Wilson Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	23 Pirates Beach W
Evnonditure from	
Expenditure from corporate funds	Galveston, TX 77554
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
	this Commission

### 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 Salaring Magas/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (other a cottographed listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Coi	nmittee Le	ft/Awards/Memorials gal Services he Instruction Gu			pense ages/Contract Labor		el Out of Dis ER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2	FILER NAME					3 Filer	· ID	(Ethics Commission Filers)
	Sch: 7/7 Rpt: 13/13		Charter School	ols Now PAC					80619	,
4	Date	5	Payee name							
	06/28/2023		The UPS Stor							
6	Amount (\$)	7	Payee address			; Zip Co	de			
	\$356.40		3005 S Lama	r Blvd Ste D10	9					
╟	Expenditure from		Austin, TX 78	704 4705						
8	J corporate funds PURPOSE	(2)				1	(h) Description			
ľ	OF	(a)		Categories listed at th		edule)	(b) Description  Check if travel	outside of T	exas Com	olete Schedule T.
	EXPENDITURE		Office Overrie	ad/Rental Exp	ense		Check if Austin			
							PO Box Rent			
9	Complete ONLY if direct expenditure to benefit C/OI	( H	Candidate/Office	holder name	C	Office sou	ght		Office he	ld
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