

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) 00084494	2 Total pages filed: 9
3 COMMITTEE NAME Congress PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/17/2023	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 830 DEER HOLLOW DR Sugarland, TX 77479	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mr. Sakki K.	
		NICKNAME LAST SUFFIX Joseph	
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 830 Deer Hollow Sugar Land, TX 77479	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 830 Deer Hollow Sugar Land, TX 77479	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (713) 402-9573	
9 REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" 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 01/01/2023 THROUGH 06/30/2023	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other 05/06/2023 <input type="checkbox"/> General <input type="checkbox"/> Special ISD election	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Congress PAC	13 Filer ID (Ethics Commission Filers) 00084494
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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.)	

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	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9,250.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 8,440.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 700.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

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.

Mr. Sakki K. Joseph

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 - GPAC

17 COMMITTEE NAME Congress PAC		18 Filer ID (Ethics Commission Filers) 00084494
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9,250.00
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 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 checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 8,440.00
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 150.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
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	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/9
2 FILER NAME Congress PAC		3 Filer ID (Ethics Commission Filers) 00084494
4 Date 03/14/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cleary, Tammy	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Sugar land , TX 77479	
8 Principal occupation / Job title (See Instructions) tlccleary@yahoo.com		9 Employer (See Instructions)
Date 03/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Melody	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Sugar land , TX 77479	
Principal occupation / Job title (See Instructions) melody.mcbroom@ey.com		Employer (See Instructions)
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fort Bend Republican GOP	Amount of Contribution (\$) \$7,500.00
	Contributor address; City; State; Zip Code Sugar Land, TX 77487	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henrichsen, Nikki	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Sugar lanbd, TX 77479	
Principal occupation / Job title (See Instructions) nikkihenrichsen@yahoo.com		Employer (See Instructions)
Date 04/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neel, Clyde	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Sugar Land , TX 77479	
Principal occupation / Job title (See Instructions) cjneel@windstream.net		Employer (See Instructions) cjneel@windstream.net

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/9
2 FILER NAME Congress PAC		3 Filer ID (Ethics Commission Filers) 00084494
4 Date 03/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, James <hr/> 6 Contributor address; City; State; Zip Code Sugar land , TX 77479	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Wright@txhome.com		9 Employer (See Instructions)
Date 03/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) bond, cindy <hr/> Contributor address; City; State; Zip Code Sugar Land , TX 77479	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) cindybond7@gmail.com		Employer (See Instructions)
Date 05/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) sanze , Oscar <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$1,600.00
Principal occupation / Job title (See Instructions) Oscar sanze Campaign		Employer (See Instructions) Oscar sanze Campaign

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 6/9

2 FILER NAME
Congress PAC

3 Filer ID (Ethics Commission Filers)
00084494

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 7/9
2 FILER NAME Congress PAC		3 Filer ID (Ethics Commission Filers) 00084494
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 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 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 1/1 Rpt: 8/9	2 FILER NAME Congress PAC	3 Filer ID (Ethics Commission Filers) 00084494
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4 Date 05/01/2023	5 Payee name Mathews, Daniel
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6 Amount (\$) \$440.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code Sugar Land Sugar land , TX 77479
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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 Push card printing for ISD Elections
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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 04/30/2023	Payee name SMS campaign Twilio INC
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Amount (\$) \$8,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code San Francisco, CA CA
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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 SMS Campaign , web Maintained , Software and other application fees
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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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PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F3:
Sch: 1/1 Rpt: 9/9

2 FILER NAME
Congress PAC

3 Filer ID (Ethics Commission Filers)
00084494

4 Date
06/30/2023

5 Name of person from whom investment is purchased
Nellies

6 Address of person from whom investment is purchased; City, State; Zip Code

Katy , TX

7 Description of investment
Office items purchase

8 Amount of investment (\$)
150.00