

# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

**FORM SPAC  
COVER SHEET PG 1**

|  |  |  |                                  |
|--|--|--|----------------------------------|
| <b>The SPAC Instruction Guide explains how to complete this form.</b>                          |  | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00087393  | <b>2</b> Total pages filed:<br>5 |
| <b>3</b> COMMITTEE NAME<br>Voters for Strong Schools   |  | <b>OFFICE USE ONLY</b>   |                                  |
| <b>4</b> COMMITTEE ADDRESS<br><br><input type="checkbox"/> Change of Address                   |  | Date Received<br><b>ELECTRONICALLY FILED</b><br>07/14/2023   |                                  |
| ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>PO Box 643<br><br>Anderson, TX 77830 |  | Date Hand-delivered or Date Postmarked<br><br>Receipt #          Amount<br><br>Date Processed<br><br>Date Imaged   |                                  |
| <b>5</b> CAMPAIGN TREASURER NAME   |  | MS / MRS / MR          FIRST          MI<br><br>Kari Lynn  |                                  |
| NICKNAME          LAST          SUFFIX<br><br>Eisenman   |  |  |                                  |
| <b>6</b> CAMPAIGN TREASURER STREET ADDRESS<br><br>(Residence or Business)                      |  | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>8636 CR 171<br><br>Anderson, TX 77830   |                                  |
| <b>7</b> CAMPAIGN TREASURER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address  |  | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>836 CR 171<br><br>Anderson, TX 77830   |                                  |
| <b>8</b> CAMPAIGN TREASURER PHONE  |  | AREA CODE          PHONE NUMBER          EXTENSION<br>(936) 825-5311   |                                  |
| <b>9</b> REPORT TYPE   |  | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded modified reporting limit<br><input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input checked="" type="checkbox"/> Dissolution (Attach PAC-DR)<br><input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination |                                  |
| <b>10</b> PERIOD COVERED   |  | Month      Day      Year          MONTH      DAY      YEAR<br>04/27/2023          THROUGH          07/14/2023  |                                  |
| <b>11</b> ELECTION   |  | ELECTION DATE          ELECTION TYPE<br>Month      Day      Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other<br>05/06/2023 <input type="checkbox"/> General <input type="checkbox"/> Special          school bond   |                                  |

**GO TO PAGE 2**

# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **SPAC**  
COVER SHEET PG 2

|   |   |
|---|---|
| <b>12 COMMITTEE NAME</b><br>Voters for Strong Schools | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00087393 |
|---|---|

|  |   |   |
|--|---|---|
| <b>14 COMMITTEE PURPOSE</b><br><br>(Attach lists on plain paper to complete this report if necessary.)<br><br><input type="checkbox"/> SUPPORT<br>(Candidate or Measure)<br><br><input type="checkbox"/> OPPOSE<br>(Candidate or Measure)<br><br><input type="checkbox"/> ASSIST<br>(Officeholder) | <input type="checkbox"/> Candidate<br><br><input type="checkbox"/> Officeholder | <b>CANDIDATE / OFFICEHOLDER NAME</b><br><br><hr/> <b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b><br><br><hr/>  |
|  | <input type="checkbox"/> Measure  | <b>BALLOT IDENTIFICATION / #</b> <span style="float: right;"><b>ELECTION DATE</b></span><br><div style="text-align: right; margin-top: 5px;">         Month    Day    Year       </div> |
|  | <b>DESCRIPTION</b><br><br><hr/>   |   |

|                                |  |          |
|--------------------------------|--|----------|
| <b>15 CONTRIBUTION TOTALS</b>  | <b>1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED</b> | \$ 0.00  |
|                                | <b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>  | \$ 0.00  |
| <b>EXPENDITURE TOTALS</b>      | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>  | \$ 0.00  |
|                                | <b>4. TOTAL POLITICAL EXPENDITURES</b>   | \$ 0.00  |
| <b>CONTRIBUTION BALANCE</b>    | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>  | \$ 86.22 |
| <b>OUTSTANDING LOAN TOTALS</b> | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>   | \$ 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.

\_\_\_\_\_  
 Kari Lynn Eisenman  
 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 - SPAC

|   |   |
|---|---|
| <b>17 COMMITTEE NAME</b><br>Voters for Strong Schools | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00087393 |
|---|---|

| <b>19 SCHEDULE SUBTOTALS</b>   |  | SUBTOTAL AMOUNT |
|--|--|-----------------|
| NAME OF SCHEDULE   |  |                 |
| 1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS  |  | \$              |
| 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 D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION                       |  | \$              |
| 7. <input type="checkbox"/> SCHEDULE E: LOANS  |  | \$              |
| 8. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                               |  | \$              |
| 9. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS   |  | \$              |
| 10. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                             |  | \$              |
| 11. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD   |  | \$              |
| 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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER |  | \$ 75.00        |

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

|  |  |  |
|--|--|--|
| <b>The Instruction Guide explains how to complete this form.</b> |  | <b>1</b> Total pages Schedule K:<br>Sch: 1/1 Rpt: 4/5                      |
| <b>2</b> FILER NAME<br>Voters for Strong Schools                 |  | <b>3</b> Filer ID (Ethics Commission Filers)<br>00087393                   |
| <b>4</b> Date<br>05/15/2023                                      | <b>5</b> Name of person from whom amount is received<br>Town of Anderson                                 | <b>8</b> Amount (\$)<br>\$75.00  |
|  | <b>6</b> Address of person from whom amount is received; City; State; Zip Code<br><br>Anderson, TX 77830 |  |
|  | <b>7</b> Purpose for which amount is received<br>refund on deposit of hall use                           | <input type="checkbox"/> Check if political contribution returned to filer |

**POLITICAL COMMITTEE  
AFFIDAVIT OF DISSOLUTION**

**FORM PAC-DR**

5 of 5

The Instruction Guide explains how to complete this form. **\*\*Complete only if "Report Type" on page 1 is marked "Dissolution" \*\***

|   |   |
|---|---|
| 1 COMMITTEE NAME<br>Voters for Strong Schools | 2 Filer ID (Ethics Commission Filers)<br>00087393 |
|---|---|

**3 Affidavit of Dissolution**

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.

Kari Lynn Eisenman  
\_\_\_\_\_  
Signature of Campaign Treasurer

**DO NOT SIGN UNLESS POLITICAL COMMITTEE IS TO BE DISSOLVED**

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