

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) 00080359	2 Total pages filed: 23
3 COMMITTEE NAME The Texas State University System PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/14/2023	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 1408 Austin, TX 78767		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mr.	Tom	
	NICKNAME	LAST	SUFFIX
		Spilman	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 823 Congress Ave., Ste. 1313 Austin, TX 78701		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 823 Congress Ave., Ste. 1313 Austin, TX 78701		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(512)	476-0697	
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 Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME The Texas State University System PAC	13 Filer ID (Ethics Commission Filers) 00080359
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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)	\$ 10,243.58
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 31,490.22
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. Tom Spilman

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**FORM GPAC**
COVER SHEET PG 3
3 of 23

17 COMMITTEE NAME The Texas State University System PAC		18 Filer ID 00080359	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT	
NAME OF SCHEDULE			
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	10,243.58
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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
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 checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	822.20
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: 1/9 Rpt: 4/23
2 FILER NAME The Texas State University System PAC		3 Filer ID (Ethics Commission Filers) 00080359
4 Date 01/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Algoe, Eric <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78681	7 Amount of Contribution (\$) \$185.00
8 Principal occupation / Job title (See Instructions) CFO		9 Employer (See Instructions) Texas State University
Date 02/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Algoe, Eric <hr/> Contributor address; City; State; Zip Code Austin, TX 78681	Amount of Contribution (\$) \$185.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Texas State University
Date 03/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Algoe, Eric <hr/> Contributor address; City; State; Zip Code Austin, TX 78681	Amount of Contribution (\$) \$185.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Texas State University
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Algoe, Eric <hr/> Contributor address; City; State; Zip Code Austin, TX 78681	Amount of Contribution (\$) \$185.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Texas State University
Date 05/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Algoe, Eric <hr/> Contributor address; City; State; Zip Code Austin, TX 78681	Amount of Contribution (\$) \$185.00
Principal occupation / Job title (See Instructions) CFO		Employer (See Instructions) Texas State University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/9 Rpt: 5/23
2 FILER NAME The Texas State University System PAC		3 Filer ID (Ethics Commission Filers) 00080359
4 Date 06/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Algoe, Eric <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78681	7 Amount of Contribution (\$) \$185.00
8 Principal occupation / Job title (See Instructions) CFO		9 Employer (See Instructions) Texas State University
Date 01/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coryell, Donald <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Athletic Director		Employer (See Instructions) TSU
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elmore, Wendy <hr/> Contributor address; City; State; Zip Code Athens, TX 75751	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Provost		Employer (See Instructions)
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elmore, Wendy <hr/> Contributor address; City; State; Zip Code Athens, TX 75751	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Provost		Employer (See Instructions)
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elmore, Wendy <hr/> Contributor address; City; State; Zip Code Athens, TX 75751	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Provost		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/9 Rpt: 6/23
2 FILER NAME The Texas State University System PAC		3 Filer ID (Ethics Commission Filers) 00080359
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elmore, Wendy <hr/> 6 Contributor address; City; State; Zip Code Athens, TX 75751	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Provost		9 Employer (See Instructions)
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elmore, Wendy <hr/> Contributor address; City; State; Zip Code Athens, TX 75751	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Provost		Employer (See Instructions)
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elmore, Wendy <hr/> Contributor address; City; State; Zip Code Athens, TX 75751	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Provost		Employer (See Instructions)
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hull, Brooks <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$83.35
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Texas State University
Date 04/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hull, Brooks <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$83.53
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Texas State University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/9 Rpt: 7/23
2 FILER NAME The Texas State University System PAC		3 Filer ID (Ethics Commission Filers) 00080359
4 Date 05/31/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hull, Brooks <hr/> 6 Contributor address; City; State; Zip Code San Marcos, TX 78666	7 Amount of Contribution (\$) \$83.35
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) Texas State University
Date 06/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hull, Brooks <hr/> Contributor address; City; State; Zip Code San Marcos, TX 78666	Amount of Contribution (\$) \$83.35
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Texas State University
Date 01/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Thomas <hr/> Contributor address; City; State; Zip Code Bridge City, TX 77611	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) College President		Employer (See Instructions) Lamar State College
Date 02/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Thomas <hr/> Contributor address; City; State; Zip Code Bridge City, TX 77611	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) College President		Employer (See Instructions) Lamar State College
Date 03/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Thomas <hr/> Contributor address; City; State; Zip Code Bridge City, TX 77611	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) College President		Employer (See Instructions) Lamar State College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/9 Rpt: 8/23
2 FILER NAME The Texas State University System PAC		3 Filer ID (Ethics Commission Filers) 00080359
4 Date 04/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Thomas <hr/> 6 Contributor address; City; State; Zip Code Bridge City, TX 77611	7 Amount of Contribution (\$) \$275.00
8 Principal occupation / Job title (See Instructions) College President		9 Employer (See Instructions) Lamar State College
Date 05/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Thomas <hr/> Contributor address; City; State; Zip Code Bridge City, TX 77611	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) College President		Employer (See Instructions) Lamar State College
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Thomas <hr/> Contributor address; City; State; Zip Code Bridge City, TX 77611	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) College President		Employer (See Instructions) Lamar State College
Date 03/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd, Lisa <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Texas State University
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pantlik, Sandra <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Associate Vice President		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/9 Rpt: 9/23
2 FILER NAME The Texas State University System PAC		3 Filer ID (Ethics Commission Filers) 00080359
4 Date 02/27/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pantlik, Sandra <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78745	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Associate Vice President		9 Employer (See Instructions)
Date 03/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pantlik, Sandra <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Associate Vice President		Employer (See Instructions)
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pantlik, Sandra <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Associate Vice President		Employer (See Instructions)
Date 05/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pantlik, Sandra <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Associate Vice President		Employer (See Instructions)
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pantlik, Sandra <hr/> Contributor address; City; State; Zip Code Austin, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Associate Vice President		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/9 Rpt: 10/23
2 FILER NAME The Texas State University System PAC		3 Filer ID (Ethics Commission Filers) 00080359
4 Date 01/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Sid <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77707	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions)
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Sid <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 03/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Sid <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 05/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Sid <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)
Date 05/31/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Sid <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77707	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/9 Rpt: 11/23
2 FILER NAME The Texas State University System PAC		3 Filer ID (Ethics Commission Filers) 00080359
4 Date 06/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentine, Sid <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77707	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions)
Date 01/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, James <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Associate Vice Chancellor		Employer (See Instructions)
Date 02/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, James <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Associate Vice Chancellor		Employer (See Instructions)
Date 03/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, James <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Associate Vice Chancellor		Employer (See Instructions)
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, James <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Associate Vice Chancellor		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/9 Rpt: 12/23
2 FILER NAME The Texas State University System PAC		3 Filer ID (Ethics Commission Filers) 00080359
4 Date 05/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, James <hr/> 6 Contributor address; City; State; Zip Code Kyle, TX 78640	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Associate Vice Chancellor		9 Employer (See Instructions)
Date 06/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, James <hr/> Contributor address; City; State; Zip Code Kyle, TX 78640	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Associate Vice Chancellor		Employer (See Instructions)
Date 05/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Alisa <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77340	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Professor/President		Employer (See Instructions) Sam Houston State

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/11 Rpt:	2 FILER NAME The Texas State University System PAC	3 Filer ID (Ethics Commission Filers) 00080359
4 Date 01/09/2023	5 Payee name Rally.org	
6 Amount (\$) 79.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 01/23/2023	Payee name Rally.org	
Amount (\$) 14.92 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 01/23/2023	Payee name Rally.org	
Amount (\$) 22.03 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 01/23/2023	Payee name Rally.org	
Amount (\$) 10.18 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/11 Rpt:	2 FILER NAME The Texas State University System PAC	3 Filer ID (Ethics Commission Filers) 00080359
4 Date 01/25/2023	5 Payee name Rally.org	
6 Amount (\$) 8.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 01/25/2023	Payee name Rally.org	
Amount (\$) 4.25 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 01/30/2023	Payee name Rally.org	
Amount (\$) 20.05 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 02/21/2023	Payee name Rally.org	
Amount (\$) 14.92 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/11 Rpt:	2 FILER NAME The Texas State University System PAC	3 Filer ID (Ethics Commission Filers) 00080359
4 Date 02/23/2023	5 Payee name Rally.org	
6 Amount (\$) 22.03 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 02/23/2023	Payee name Rally.org	
Amount (\$) 10.18 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 02/27/2023	Payee name Rally.org	
Amount (\$) 8.20 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 02/27/2023	Payee name Rally.org	
Amount (\$) 4.25 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 4/11 Rpt:	2 FILER NAME The Texas State University System PAC	3 Filer ID (Ethics Commission Filers) 00080359
4 Date 02/28/2023	5 Payee name Rally.org	
6 Amount (\$) 20.05 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 03/21/2023	Payee name Rally.org	
Amount (\$) 14.92 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 03/23/2023	Payee name Rally.org	
Amount (\$) 22.03 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 03/23/2023	Payee name Rally.org	
Amount (\$) 10.18 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee

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SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 5/11 Rpt:	2 FILER NAME The Texas State University System PAC	3 Filer ID (Ethics Commission Filers) 00080359
4 Date 03/27/2023	5 Payee name Rally.org	
6 Amount (\$) 8.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 03/27/2023	Payee name Rally.org	
Amount (\$) 4.25 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 03/28/2023	Payee name Rally.org	
Amount (\$) 6.88 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 03/30/2023	Payee name Rally.org	
Amount (\$) 20.05 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 6/11 Rpt:	2 FILER NAME The Texas State University System PAC	3 Filer ID (Ethics Commission Filers) 00080359
4 Date 03/31/2023	5 Payee name Rally.org	
6 Amount (\$) 79.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 04/21/2023	Payee name Rally.org	
Amount (\$) 14.92 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 04/26/2023	Payee name Rally.org	
Amount (\$) 22.03 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 04/26/2023	Payee name Rally.org	
Amount (\$) 10.18 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

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1 Total pages Schedule I: Sch: 7/11 Rpt:	2 FILER NAME The Texas State University System PAC	3 Filer ID (Ethics Commission Filers) 00080359
4 Date 04/26/2023	5 Payee name Rally.org	
6 Amount (\$) 8.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 04/26/2023	Payee name Rally.org	
Amount (\$) 4.25 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 04/28/2023	Payee name Rally.org	
Amount (\$) 6.88 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 05/01/2023	Payee name Rally.org	
Amount (\$) 20.05 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee

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SCHEDULE I

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1 Total pages Schedule I: Sch: 8/11 Rpt:	2 FILER NAME The Texas State University System PAC	3 Filer ID (Ethics Commission Filers) 00080359
4 Date 05/19/2023	5 Payee name Rally.org	
6 Amount (\$) 158.30 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 05/22/2023	Payee name Rally.org	
Amount (\$) 14.92 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 05/23/2023	Payee name Rally.org	
Amount (\$) 22.03 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 05/23/2023	Payee name Rally.org	
Amount (\$) 10.18 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee

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SCHEDULE I

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1 Total pages Schedule I: Sch: 9/11 Rpt:	2 FILER NAME The Texas State University System PAC	3 Filer ID (Ethics Commission Filers) 00080359
4 Date 05/25/2023	5 Payee name Rally.org	
6 Amount (\$) 8.20 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 05/25/2023	Payee name Rally.org	
Amount (\$) 4.25 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 05/31/2023	Payee name Rally.org	
Amount (\$) 6.88 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 05/31/2023	Payee name Rally.org	
Amount (\$) 20.05 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee

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SCHEDULE I

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1 Total pages Schedule I: Sch: 10/11 Rpt:		2 FILER NAME The Texas State University System PAC		3 Filer ID (Ethics Commission Filers) 00080359	
4 Date 06/21/2023		5 Payee name Rally.org			
6 Amount (\$) 14.92 <input type="checkbox"/> Expenditure from corporate funds		7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105			
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) Processing Fee	
Date 06/26/2023		Payee name Rally.org			
Amount (\$) 22.03 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) Processing Fee	
Date 06/26/2023		Payee name Rally.org			
Amount (\$) 10.18 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) Processing Fee	
Date 06/26/2023		Payee name Rally.org			
Amount (\$) 8.20 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) Processing Fee	

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1 Total pages Schedule I: Sch: 11/11 Rpt:	2 FILER NAME The Texas State University System PAC	3 Filer ID (Ethics Commission Filers) 00080359
4 Date 06/26/2023	5 Payee name Rally.org	
6 Amount (\$) 4.25 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 06/28/2023	Payee name Rally.org	
Amount (\$) 6.88 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee
Date 06/30/2023	Payee name Rally.org	
Amount (\$) 20.05 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Processing Fee