

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) 00057441	2 Total pages filed: 27
3 COMMITTEE NAME Texas Democratic Women of the Brazos Valley		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 3232 Bryan, TX 77805		
	5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Marianne ----- NICKNAME LAST SUFFIX Arnold		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5059 N Oakland Ln. Bryan, TX 77808		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 33 Kurten, TX 77862		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (979) 204-1448		
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 Texas Democratic Women of the Brazos Valley	13 Filer ID (Ethics Commission Filers) 00057441
---	---

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)	\$ 160.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,635.09
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,793.51
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,678.74
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.

Marianne Arnold

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 Texas Democratic Women of the Brazos Valley		18 Filer ID (Ethics Commission Filers) 00057441
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	2,635.09
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	2,793.51
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 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: 1/12 Rpt: 4/27
2 FILER NAME Texas Democratic Women of the Brazos Valley		3 Filer ID (Ethics Commission Filers) 00057441
4 Date 04/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALONZO, Angelita <hr/> 6 Contributor address; City; State; Zip Code Bryan, TX 77802	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Not Employed
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arbuckle, Linda <hr/> Contributor address; City; State; Zip Code Somerville, TX 77879	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 04/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Marianne <hr/> Contributor address; City; State; Zip Code Kurten, TX 77862	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Ess corporation
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Marianne <hr/> Contributor address; City; State; Zip Code Kurten, TX 77862	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Ess corporation
Date 06/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, Janis <hr/> Contributor address; City; State; Zip Code Bryan, TX 77802	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/12 Rpt: 5/27
2 FILER NAME Texas Democratic Women of the Brazos Valley		3 Filer ID (Ethics Commission Filers) 00057441
4 Date 04/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Autrey, Linda <hr/> 6 Contributor address; City; State; Zip Code Somerville, TX 77879	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Not Employed
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bastian, Liliana <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) University of Exeter
Date 04/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Batchelor, Sue <hr/> Contributor address; City; State; Zip Code Bryan, TX 77803	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bogue, Richard <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) University of Iowa
Date 04/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CAVANESS, THOMAS <hr/> Contributor address; City; State; Zip Code Bryan, TX 77803	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/12 Rpt: 6/27
2 FILER NAME Texas Democratic Women of the Brazos Valley		3 Filer ID (Ethics Commission Filers) 00057441
4 Date 04/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christner, Cynthia <hr/> 6 Contributor address; City; State; Zip Code College Station, TX 77840	7 Amount of Contribution (\$) \$519.75
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Self-Employed
Date 04/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christner, Cynthia <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Self-Employed
Date 04/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christner, Cynthia <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Self-Employed
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudding, Janet <hr/> Contributor address; City; State; Zip Code Bryan, TX 77802	Amount of Contribution (\$) \$25.99
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Antina Ranch
Date 04/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudding, Janet <hr/> Contributor address; City; State; Zip Code Bryan, TX 77806	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/12 Rpt: 7/27
2 FILER NAME Texas Democratic Women of the Brazos Valley		3 Filer ID (Ethics Commission Filers) 00057441
4 Date 04/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Brett <hr/> 6 Contributor address; City; State; Zip Code Bryan, TX 77801	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Not Employed
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellison, Sherry <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erion, Irene <hr/> Contributor address; City; State; Zip Code Bryan, TX 77802	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Tina <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$25.99
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Texas A&M Foundation
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Cheryl <hr/> Contributor address; City; State; Zip Code Waco, TX 76708	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/12 Rpt: 8/27
2 FILER NAME Texas Democratic Women of the Brazos Valley		3 Filer ID (Ethics Commission Filers) 00057441
4 Date 01/02/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GONGORA, VICTOR <hr/> 6 Contributor address; City; State; Zip Code College Station, TX 77840	7 Amount of Contribution (\$) \$25.99
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) TAMU
Date 02/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gallucci, Cameron <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$15.59
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerston, Jan <hr/> Contributor address; City; State; Zip Code Bryan, TX 77801	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Self-employed
Date 03/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glantz, Jillian <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$15.59
Principal occupation / Job title (See Instructions)		Employer (See Instructions) TAMU
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldsmith, Carol <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) TAMU

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/12 Rpt: 9/27
2 FILER NAME Texas Democratic Women of the Brazos Valley		3 Filer ID (Ethics Commission Filers) 00057441
4 Date 04/12/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanna, Katina <hr/> 6 Contributor address; City; State; Zip Code College Station, TX 77840	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) none
Date 01/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanna-Calvert, Donna <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$25.59
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Jan <hr/> Contributor address; City; State; Zip Code College Station, TX 77840	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Texas A&M University
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Lee <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Blinn College
Date 02/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LeUnes, Judy <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$103.95
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/12 Rpt: 10/27
2 FILER NAME Texas Democratic Women of the Brazos Valley		3 Filer ID (Ethics Commission Filers) 00057441
4 Date 04/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LeUnes, Judy <hr/> 6 Contributor address; City; State; Zip Code College Station, TX 77845	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) self
Date 04/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LeUnes, Judy <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LeUnes, Judy <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) self
Date 01/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Machinski, Doris <hr/> Contributor address; City; State; Zip Code Bryan, TX 77802	Amount of Contribution (\$) \$51.97
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 02/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Machrowicz, Jeanne <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$51.98
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/12 Rpt: 11/27
2 FILER NAME Texas Democratic Women of the Brazos Valley		3 Filer ID (Ethics Commission Filers) 00057441
4 Date 02/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGrail, Susan <hr/> 6 Contributor address; City; State; Zip Code College Station, TX 77845	7 Amount of Contribution (\$) \$25.99
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Not Employed
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Metcalf, Teri <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) none
Date 04/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosavi, Gina <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Veterinarian
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olshak, Sandra <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Self
Date 03/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Caroline <hr/> Contributor address; City; State; Zip Code Bryan, TX 77802	Amount of Contribution (\$) \$15.59
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/12 Rpt: 12/27
2 FILER NAME Texas Democratic Women of the Brazos Valley		3 Filer ID (Ethics Commission Filers) 00057441
4 Date 06/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parsons, Carolyn <hr/> 6 Contributor address; City; State; Zip Code Bryan, TX 77802	7 Amount of Contribution (\$) \$15.59
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Not Employed
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pascale, Lauren <hr/> Contributor address; City; State; Zip Code Kansas City, MO 64106	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) US EPA
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pawlak, Jonathan <hr/> Contributor address; City; State; Zip Code Bryan, TX 77808	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) PROSPERITY Bank
Date 04/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter Rabe, Mary S <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) self
Date 04/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Presley, Bobby <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/12 Rpt: 13/27
2 FILER NAME Texas Democratic Women of the Brazos Valley		3 Filer ID (Ethics Commission Filers) 00057441
4 Date 04/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ptomey, Sara <hr/> 6 Contributor address; City; State; Zip Code Bryan, TX 77807	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Not Employed
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riedel, Karen <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$15.59
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not employed
Date 04/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salin, Victoria <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$65.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Texas A&M University
Date 01/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schreiber, Jenna <hr/> Contributor address; City; State; Zip Code Bryan, TX 77802	Amount of Contribution (\$) \$25.99
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 04/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schreiber, Jenna <hr/> Contributor address; City; State; Zip Code Bryan, TX 77802	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/12 Rpt: 14/27
2 FILER NAME Texas Democratic Women of the Brazos Valley		3 Filer ID (Ethics Commission Filers) 00057441
4 Date 04/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swanson, Rosemarie <hr/> 6 Contributor address; City; State; Zip Code Bryan, TX 77801	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Not Employed
Date 04/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tenczynski, Kathy <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Memorial Hermann
Date 05/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Sandra <hr/> Contributor address; City; State; Zip Code Bryan, TX 77802	Amount of Contribution (\$) \$103.95
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 02/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez, Celina <hr/> Contributor address; City; State; Zip Code Bryan, TX 77803	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed
Date 04/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vitek, Margaret <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/12 Rpt: 15/27
2 FILER NAME Texas Democratic Women of the Brazos Valley		3 Filer ID (Ethics Commission Filers) 00057441
4 Date 04/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womack, Katie	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code College Station, TX 77845		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions) Texas A&M Transportation Institute
Date 04/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) dippel, cynthia	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code bryan, TX 77802		
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Not Employed

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: 1/12 Rpt: 16/27	2	FILER NAME Texas Democratic Women of the Brazos Valley	3	Filer ID (Ethics Commission Filers) 00057441
4	Date 06/30/2023	5	Payee name Act Blue		
6	Amount (\$) \$86.21 <input type="checkbox"/> Expenditure from corporate funds	7	Payee address; City; State; Zip Code ActBlue PO Box 44 Somerville, MA 12144		
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 Finance chg		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought
	Date 01/15/2023		Payee name Brazos County Dem Party		
	Amount (\$) \$33.33 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code PO Box 3232 Bryan, TX 77805		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to BCDP		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought
	Date 02/15/2023		Payee name Brazos County Dem Party		
	Amount (\$) \$33.33 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code PO Box 3232 Bryan, TX 77805		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to BCDP		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought

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: 2/12 Rpt: 17/27	2 FILER NAME Texas Democratic Women of the Brazos Valley	3 Filer ID (Ethics Commission Filers) 00057441
---	--	--

4 Date 03/15/2023	5 Payee name Brazos County Dem Party
-----------------------------	--

6 Amount (\$) \$33.33 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 3232 Bryan, TX 77805
--	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to BCDP
---------------------------------	---	--

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 04/15/2023	Payee name Brazos County Dem Party
--------------------	---------------------------------------

Amount (\$) \$33.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 3232 Bryan, TX 77805
---	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to BCDP
-------------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 05/15/2023	Payee name Brazos County Dem Party
--------------------	---------------------------------------

Amount (\$) \$33.33 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 3232 Bryan, TX 77805
---	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to BCDP
-------------------------------	---	--

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: 3/12 Rpt: 18/27	2 FILER NAME Texas Democratic Women of the Brazos Valley	3 Filer ID (Ethics Commission Filers) 00057441
---	--	--

4 Date 06/15/2023	5 Payee name Brazos County Dem Party
-----------------------------	--

6 Amount (\$) \$33.33 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 3232 Bryan, TX 77805
--	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(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 Contribution to BCDP
---------------------------------	---	--

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 02/28/2023	Payee name Brazos County NAACP
--------------------	-----------------------------------

Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3203 Bethany Dr Bryan, TX 77803
--	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Honorarium	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Honorarium
-------------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 06/14/2023	Payee name Brazos Valley African American Heritage Society
--------------------	---

Amount (\$) \$50.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 E Pruitt St Bryan, TX 77803
---	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Parade entry fee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parade Entry
-------------------------------	---	--

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: 4/12 Rpt: 19/27	2 FILER NAME Texas Democratic Women of the Brazos Valley	3 Filer ID (Ethics Commission Filers) 00057441
---	--	--

4 Date 02/28/2023	5 Payee name Brazos Valley African American Museum
-----------------------------	--

6 Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 500 E Pruitt St Bryan, TX 77803
---	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraiser tix
---------------------------------	---	--

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 04/14/2023	Payee name Facebook
--------------------	------------------------

Amount (\$) \$18.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025
---	--

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 Advertising
-------------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 04/24/2023	Payee name Facebook
--------------------	------------------------

Amount (\$) \$18.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025
---	--

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 Advertising
-------------------------------	--	---

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: 5/12 Rpt: 20/27	2	FILER NAME Texas Democratic Women of the Brazos Valley	3	Filer ID (Ethics Commission Filers) 00057441
4	Date 04/28/2023	5	Payee name Facebook		
6	Amount (\$) \$3.99 <input type="checkbox"/> Expenditure from corporate funds	7	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
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 Advertising		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 02/28/2023		Payee name Glantz		
	Amount (\$) \$44.94 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 1135 Georgia Ct College Station TX 77840		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Flowers	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flowers		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 05/05/2023		Payee name Glantz		
	Amount (\$) \$25.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 1135 Georgia Ct College Station TX 77840		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 CD for Fundraiser		
		Complete <u>ONLY</u> 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: 6/12 Rpt: 21/27	2 FILER NAME Texas Democratic Women of the Brazos Valley	3 Filer ID (Ethics Commission Filers) 00057441
4 Date 01/02/2023	5 Payee name Google LLC	
6 Amount (\$) \$12.79 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1600 Ampitheater Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2023	Payee name Google LLC	
Amount (\$) \$12.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheater Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/02/2023	Payee name Google LLC	
Amount (\$) \$12.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheater Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting software
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: 7/12 Rpt: 22/27	2 FILER NAME Texas Democratic Women of the Brazos Valley	3 Filer ID (Ethics Commission Filers) 00057441
---	--	--

4 Date 04/02/2023	5 Payee name Google LLC
-----------------------------	-----------------------------------

6 Amount (\$) \$12.79 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1600 Ampitheater Parkway Mountain View, CA 94043
--	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting software
---------------------------------	---	--

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 05/02/2023	Payee name Google LLC
--------------------	--------------------------

Amount (\$) \$12.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheater Parkway Mountain View, CA 94043
---	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting software
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 06/02/2023	Payee name Google LLC
--------------------	--------------------------

Amount (\$) \$12.79 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1600 Ampitheater Parkway Mountain View, CA 94043
---	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting software
-------------------------------	---	--

Complete <u>ONLY</u> 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: 8/12 Rpt: 23/27	2 FILER NAME Texas Democratic Women of the Brazos Valley	3 Filer ID (Ethics Commission Filers) 00057441
4 Date 02/28/2023	5 Payee name Janet Dudding Campaign	
6 Amount (\$) \$750.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 2298 Bryan, TX 77806	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation to Candidate
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Dudding, Janet	Office sought Office held
Date 01/24/2023	Payee name Mosavi	
Amount (\$) \$27.48 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Mustang Lane College Station, TX 77845	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Naturalization supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/24/2023	Payee name Mosavi	
Amount (\$) \$31.97 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3401 Mustang Lane College Station, TX 77845	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Naturalization supplies
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: 9/12 Rpt: 24/27	2 FILER NAME Texas Democratic Women of the Brazos Valley	3 Filer ID (Ethics Commission Filers) 00057441
4 Date 04/10/2023	5 Payee name Mosavi	
6 Amount (\$) \$148.13 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3401 Mustang Lane College Station, TX 77845	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Naturalization supplies
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2023	Payee name Queen Theater	
Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 110 S Main St Bryan, TX 77803	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Facility rental
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/05/2023	Payee name Queen Theater	
Amount (\$) \$313.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 110 S Main St Bryan, TX 77803	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Facility rental
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: 10/12 Rpt: 25/27	2 FILER NAME Texas Democratic Women of the Brazos Valley	3 Filer ID (Ethics Commission Filers) 00057441
4 Date 03/31/2023	5 Payee name Sticker Mule	
6 Amount (\$) \$144.72 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 49 Elk St Amsterdam, NY 12010	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/31/2023	Candidate/Officeholder name TDW of Texas	
Amount (\$) \$60.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
Date 01/31/2023	Payee name TDW of Texas	
Amount (\$) \$60.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Attn: Mary Morrison 5823 Doliver Drive Houston, TX 77057	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/28/2023	Candidate/Officeholder name TDW of Texas	
Amount (\$) \$70.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
Date 02/28/2023	Payee name TDW of Texas	
Amount (\$) \$70.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Attn: Mary Morrison 5823 Doliver Drive Houston, TX 77057	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 11/12 Rpt: 26/27	2 FILER NAME Texas Democratic Women of the Brazos Valley	3 Filer ID (Ethics Commission Filers) 00057441
4 Date 03/31/2023	5 Payee name TDW of Texas	
6 Amount (\$) \$30.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code Attn: Mary Morrison 5823 Doliver Drive Houston, TX 77057	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dues
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/30/2023	Payee name TDW of Texas	
Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Attn: Mary Morrison 5823 Doliver Drive Houston, TX 77057	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/31/2023	Payee name TDW of Texas	
Amount (\$) \$20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Attn: Mary Morrison 5823 Doliver Drive Houston, TX 77057	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dues
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: 12/12 Rpt: 27/27	2 FILER NAME Texas Democratic Women of the Brazos Valley	3 Filer ID (Ethics Commission Filers) 00057441
--	--	--

4 Date 06/30/2023	5 Payee name TDW of Texas
-----------------------------	-------------------------------------

6 Amount (\$) \$10.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code Attn: Mary Morrison 5823 Doliver Drive Houston, TX 77057
--	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dues
---------------------------------	---	--

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 06/29/2023	Payee name Zippity Print
--------------------	-----------------------------

Amount (\$) \$155.35 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1060 W Bagley Rd Suite 102 Berea, OH 44017
--	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--	--	--