

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) 00034189	2 Total pages filed: 8
3 COMMITTEE NAME Across The Track PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/16/2023	
		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 3909 Fernwood Dr. Houston, TX 77021		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Francis <hr/> NICKNAME LAST SUFFIX Cook		
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3909 Fernwood Dr. Houston, TX 77021		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4418 Heatherwilde St. Sugar Land, TX 77479		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 582-9975		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year Month Day Year 01/01/2023 THROUGH 06/30/2023		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Across The Track PAC	13 Filer ID (Ethics Commission Filers) 00034189
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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)	\$ 2,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Francis Cook

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 8

17 COMMITTEE NAME Across The Track PAC		18 Filer ID (Ethics Commission Filers) 00034189
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,000.00
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	\$ 2,000.00
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: 1/4 Rpt: 4/8
2 FILER NAME Across The Track PAC		3 Filer ID (Ethics Commission Filers) 00034189
4 Date 06/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRANCH, THELDON (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77027	
8 Principal occupation / Job title (See Instructions) Airport Concessions		9 Employer (See Instructions) SELF EMPLOYED
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BUSH, CHARLES (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code DALLAS, TX 75229	
Principal occupation / Job title (See Instructions) ENTERTAINMENT & FOODSERVICE		Employer (See Instructions) SELF EMPLOYED
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergeron, ALAN (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77004	
Principal occupation / Job title (See Instructions) FOOD SERVICE		Employer (See Instructions) SELF EMPLOYED
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) COOK, FRANCIS (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77021	
Principal occupation / Job title (See Instructions) BUSINESS SERVICES & CONSULTING		Employer (See Instructions) SELF EMPLOYED
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CREUZOT III, PERCY (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77018	
Principal occupation / Job title (See Instructions) FOOD SERVICE		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: 2/4 Rpt: 5/8
2 FILER NAME Across The Track PAC		3 Filer ID (Ethics Commission Filers) 00034189
4 Date 06/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DAVIS Sr., KEITH (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77074	
8 Principal occupation / Job title (See Instructions) PUBLISHING		9 Employer (See Instructions) SELF EMPLOYED
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DONATTO Sr., JAMES (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77004	
Principal occupation / Job title (See Instructions) AD SPECIALITES		Employer (See Instructions) SELF EMPLOYED
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GILLON Jr., JOHN (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77098	
Principal occupation / Job title (See Instructions) OFFICE EQUIPMENT		Employer (See Instructions) SELF EMPLOYED
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAMB, EDWARD (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code ST LOUIS, MO 63103	
Principal occupation / Job title (See Instructions) PRINCIPAL		Employer (See Instructions) PROFESSIONAL ENVIRONMENTAL ENGINEERING
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOHNSON, HARRY	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77042	
Principal occupation / Job title (See Instructions) ATTORNEY		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: 3/4 Rpt: 6/8
2 FILER NAME Across The Track PAC		3 Filer ID (Ethics Commission Filers) 00034189
4 Date 06/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JONES, THOMAS (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77081	
8 Principal occupation / Job title (See Instructions) PARTNER-CPA		9 Employer (See Instructions) McCONNEL, JONES, LANIER & MURPHY
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MAYBERRY, SHARONNE (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77004	
Principal occupation / Job title (See Instructions) HOME BUILDER		Employer (See Instructions) SELF EMPLOYED
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marks, Jonathan	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Humble, TX 77338	
Principal occupation / Job title (See Instructions) president		Employer (See Instructions) Concentric Construction Corporation LLC
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, KEN (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code LaMARQUE, TX 77568	
Principal occupation / Job title (See Instructions) INSURANCE		Employer (See Instructions) SELF EMPLOYED
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROY, JENNIFER (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77004	
Principal occupation / Job title (See Instructions) HEALTH CARE		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: 4/4 Rpt: 7/8
2 FILER NAME Across The Track PAC		3 Filer ID (Ethics Commission Filers) 00034189
4 Date 06/20/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SAM, DeANDRE (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77021	
8 Principal occupation / Job title (See Instructions) MOVING & STORAGE		9 Employer (See Instructions) SELF EMPLOYED
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, brian	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code houston, TX 77004	
Principal occupation / Job title (See Instructions) construction mgt		Employer (See Instructions) BSCI
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SWINDELL, CHARLES (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77042	
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) KINGSPPOINT INSURANCE
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON, GERALD (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77094	
Principal occupation / Job title (See Instructions) FINANCIAL SERVICES		Employer (See Instructions) SELF EMPLOYED
Date 06/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WOMACK, GERALD (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77004	
Principal occupation / Job title (See Instructions) REAL ESTATE		Employer (See Instructions) SELF 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: 1/1 Rpt: 8/8	2 FILER NAME Across The Track PAC	3 Filer ID (Ethics Commission Filers) 00034189
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4 Date 03/21/2023	5 Payee name Dannielle Keys Bess Campaign
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6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 8367 Houston, TX 77288
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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 COH city council at large 2
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/21/2023	Payee name Melanine Miles Campaign
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Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2406 arbor houston, TX 77004
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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 candidate city of houston city council at large 1
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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