FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00082064 3 COMMITTEE NAME **OFFICE USE ONLY** Richardson Democrats Date Received **ELECTRONICALLY FILED** 07/17/2023 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 411 W. Lookout Dr. Date Hand-delivered or Date Postmarked Change of Address Richardson, TX 75080 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mrs. Wendy NAME NICKNAME LAST **SUFFIX** Banul STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 411 W. Lookout Dr. STREET **ADDRESS** (Residence or Business) Richardson, TX 75080 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 411 W. Lookout Dr. MAILING **ADDRESS** Richardson, TX 75080 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (469) 438-7370 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff Year 10 PERIOD Month Day Year Day Month **COVERED THROUGH** 01/01/2023 06/30/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Richardson Democrats			00082064	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Dan Barrios Richardson City	Council	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	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	PLEDGES, LOANS, CONTRIBUTIONS M X check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,125.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	6,022.15
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	2,865.49
OUTSTANDING LOAN TOTALS	I	AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	<u>'</u>		<u> </u>	
		I swear, or affirm, under penalty of potrue and correct and includes all infounder Title 15, Election Code.		
		Mrs. We	endy Banul	
		-	ampaign Treasu	rer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, 1	this the	day
		which, witness my hand and seal of office.		
Signature of officer ac	lministering oath	Printed name of officer administering oath	Title of offic	eer administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

3 of 11				3 of 11		
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Commission	n Filers)	
Ric	hardso	•	ŕ			
19 SCI	Richardson Democrats 00082064 19 SCHEDULE SUBTOTALS					
l		SUBTOTAL A	MOUNT			
NAME OF SCHEDULE						
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,125.00	
2.	П	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		 		
۷.	Ш	SCHEDOLE AZ. NON MONETARY (IN KIND) I SEMICAL CONTRIBUTIONS		3		
_						
3.	Ш	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	ND			
4.		ORGANIZATION	VK	\$		
5.	П	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$		
		EABOR ORGANIZATION				
6.	П	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$		
	ш	SOMEDOLE SS. MONE PART SOME ON THOM SOME ON THOM ON EXECUTION	7.11127.111011	•		
		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR				
7.	Ш	ORGANIZATION		\$		
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$		
9.	П	SCHEDULE E: LOANS		\$		
				<u> </u>		
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	6,022.15	
					0,022.10	
11		COUEDING FOR LINDAID INCLIDED OBLICATIONS				
11.	Ш	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
12.	Ш	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
14.	X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	1,000.00	
	<u> </u>				_,000.00	
15.	\Box	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	RETURNED			
15.	Ш	TO FILER		\$		
				•		
l						
l						
I						

	MONEI	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/11	
2	FILER NAME	2				3	Filer ID (Ethics Commission	n Filers)
	Richardson I		_			L	00082064	
4	Date 01/08/2023	5 Full name of contributor Banul, Wendy (Ms.) 6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$200.00
•	Dringing con	Richardson, TX 75080 pation / Job title (See Instructions			Employer (See Instructions			
0	Real Estate)		Employer (See Instructions Self	s)		
	Date 04/30/2023	Full name of contributor Donovan, Carol (The Hon Contributor address; City; St					Amount of Contribution (\$)	\$300.00
		Dallas, TX 75214				<u></u>		
	Attorney-Me	pation / Job title (See Instructions)		Employer (See Instructions Carol Crabtree Donovar		^	
					Carol Crabilee Dolloval	1 -		
	Date 01/08/2023	Full name of contributor Garcia, Catalina (Dr.) Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$100.00
		Dallas, TX 75231						
	Principal occu	nation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	not employed	d			not employed			
	Date 02/26/2023	Full name of contributor Garcia, Catalina (Dr.) Contributor address; City; St Dallas, TX 75231	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu not employed	pation / Job title (See Instructions d)		Employer (See Instructions not employed	5)		
	Date 03/12/2023	Full name of contributor Garcia, Catalina (Dr.) Contributor address; City; St Dallas, TX 75231	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu not employe	pation / Job title (See Instructions d)		Employer (See Instructions not employed	5)		

MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/11
FILER NAME Richardson I			3 Filer ID (Ethics Commission Filers) 00082064
Date 06/30/2023	5 Full name of contributor out-of-state PAC (ID#:_ Garcia, Catalina (Dr.) 6 Contributor address; City; State; Zip Code)	7 Amount of Contribution (\$) \$100.00
Daine in all a second	Dallas, TX 75231		
		not employed	5)
Date 01/08/2023	Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$250.00
	pation / Job title (See Instructions)	Employer (See Instructions	
Insurance A		Brooke Hull Insurance A	agency .
02/05/2023	Griffin, Patricia Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$25.00
	Richardson, TX 75080		
•	,	Employer (See Instructions Brooke Hull Insurance A	
Date 05/21/2023	Full name of contributor out-of-state PAC (ID#:_ Griffin, Patricia Contributor address; City; State; Zip Code Richardson, TX 75080		Amount of Contribution (\$) \$25.00
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)
Insurance A	gent	Brooke Hull Insurance A	Agency
	Principal occulinsurance Ad Date 02/05/2023 Principal occulinsurance Ad Date 02/05/2023 Principal occulinsurance Ad Date 02/05/2023	The Instruction Guide explains how to complete this f FILER NAME Richardson Democrats Date 06/30/2023 5 Full name of contributor out-of-state PAC (ID#:_ Garcia, Catalina (Dr.) 6 Contributor address; City; State; Zip Code Dallas, TX 75231 Principal occupation / Job title (See Instructions) not employed Contributor address; City; State; Zip Code Richardson, TX 75080 Principal occupation / Job title (See Instructions) Insurance Agent Date 02/05/2023 Griffin, Patricia Contributor address; City; State; Zip Code Richardson, TX 75080 Principal occupation / Job title (See Instructions) Insurance Agent Date Richardson, TX 75080 Principal occupation / Job title (See Instructions) Insurance Agent Date Richardson, TX 75080 Principal occupation / Job title (See Instructions) Insurance Agent Date Contributor address; City; State; Zip Code Richardson, TX 75080 Principal occupation / Job title (See Instructions) Insurance Agent Date O5/21/2023 Griffin, Patricia Contributor out-of-state PAC (ID#:_ O5/21/2023 Contributor address; City; State; Zip Code	Richardson Democrats Date 06/30/2023

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/5 Rpt: 6/11	Richardson Democrats 00082064
4 Date	5 Payee name
05/03/2023	Bankem Printing
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,600.00	2357 S Collins St
— Forest diture from	
Expenditure from corporate funds	Arlington, TX 76014
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Postcard Mailers
	Posicard Maners
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ere	
Date	Payee name
03/31/2023	Barrios, Dan
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	
Expenditure from corporate funds	TX
·	<u> </u>
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made Ry Contributions/Donations Made Ry
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	City Council Candidate Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
D-1-	
Date	Payee name
02/15/2023	Beyond the Slogan
Amount (\$)	Payee address; City; State; Zip Code
\$610.00	PO Box 5809
Evpanditure from	
Expenditure from corporate funds	Sachse TX, TX 75098
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Texting Campaign
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services 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)

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	rs)
Sch: 2/5 Rpt: 7/11	Richardson Democrats 00082064	
4 Date	5 Payee name	
06/26/2023	Chris Norwood	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$200.00		
Expenditure from corporate funds	TX	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Music for Party Event	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	H	
Date	Payee name	
03/20/2023	DSPOLITICAL	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	1133 15th St NW, Suite 800	
Expenditure from corporate funds	Washington, DC 20005	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Registered Voter Data	
	Trogretores votes Data	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·	
Date	Payee name	
02/02/2023	Four Bullets	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 640 N. Interurban St	
\$200.00	040 N. Interurban St	
Expenditure from	Dishardara TV 75000	
corporate funds	Richardson, TX 75080	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Party Event	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	Al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 3/5 Rpt: 8/11	Richardson Democrats 00082064	
4 Date	5 Payee name	
02/21/2023	Four Bullets	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$242.00	640 N. Interurban St	
Expenditure from corporate funds	Richardson, TX 75080	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Event Expense	
	Check if Austin, TX, officeholder living expense	
	Democratic Event	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
Date	Payee name	
04/10/2023	Four Bullets	
Amount (\$)	Payee address; City; State; Zip Code	
\$200.00	640 N. Interurban St	
Expenditure from corporate funds	Richardson, TX 75080	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Party Event	
	Tarty Event	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
Date	Payee name	
06/16/2023	Four Bullets	
Amount (\$)	Payee address; City; State; Zip Code	_
\$200.00	640 N. Interurban St	
Expenditure from corporate funds	Richardson, TX 75080	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Party Event	
	Tarty Event	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
		_

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

Credit Card Payment	The Instruction Guide explains how to cor	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/5 Rpt: 9/11	Richardson Democrats	00082064
4 Date	5 Payee name	
03/01/2023	Staycation	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de
\$200.00	201 S Texas St	
Expenditure from corporate funds	Richardson, TX 75081	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Party Event
O Commission ONLY if direct	Constitute (Office helder repres	Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	oht Office held
Date	Payee name	
03/30/2023	Staycation	
Amount (\$)	Payee address; City; State; Zip Cod	de
\$200.00	201 S Texas St	
Expenditure from		
corporate funds	Richardson, TX 75081	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Party Event
		. 4.19
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O	Н	
Date	Payee name	
04/25/2023	Staycation	
Amount (\$)	Payee address; City; State; Zip Coo	de
\$200.00	201 S Texas St	
Expenditure from corporate funds	Richardson, TX 75081	
PURPOSE		(b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
		Party Event
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght Office held
experiorare to benefit C/O		

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

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:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/5 Rpt: 10/11	Richardson Democrats	00082064
4 Date	5 Payee name	1
05/02/2023	The Order Desk	
6 Amount (\$)	7 Payee address; City; State; Zip	Code
\$1,450.00	Monroe St	
Expenditure from corporate funds	Dallas, TX 75220	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Postage	Check if Austin, TX, officeholder living expense
		Postcard Postage
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office s	ought Office held
Date	Payee name	
05/23/2023	laughlin, Ginny	
Amount (\$)	Payee address; City; State; Zip	Code
\$120.15	804 Fireston Ln	
Expenditure from corporate funds	Richardson, TX 75080	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
1 01(1 002	(See Categories listed at the top of this schedule)	(a) Description
OF		Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense
EXPENDITURE	Event Expense	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event
EXPENDITURE Complete ONLY if direct	Event Expense Candidate/Officeholder name Office s	Check if Austin, TX, officeholder living expense Food for Event

NON-POLITICAL EXPENDITURES

	MADE FROM F	POLITICAL CONTRIBUTIONS SCHEDULE I		
	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Richardson Democrats 3 Filer ID (Ethics Commission Filers) 00082064		
4	Date 01/19/2023	5 Payee name Alter, Johnette		
6	Amount (\$) 500.00 Expenditure from corporate funds	7 Payee Address; City; State; Zip TX		
В	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense (b) Description (See instructions regarding type of information required.) Scholarship for Leadership Richardson		
	Date 01/19/2023	Payee name Robinson, Reid		
	Amount (\$) 500.00 Expenditure from corporate funds	Payee Address; City; State; Zip TX		
	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense (b) Description (See instructions regarding type of information required.) Scholarship for Leadership Richardson		
		,		