#### 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) 00085808 3 COMMITTEE NAME **OFFICE USE ONLY** Texans For Responsible Education PAC Date Received **ELECTRONICALLY FILED** 07/17/2023 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 2149 Date Hand-delivered or Date Postmarked Change of Address Euless, TX 76039 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Brody NAME NICKNAME LAST **SUFFIX** Mulligan STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 312 Rambling Ct STREET **ADDRESS** (Residence or Business) Euless, TX 76039 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** P.O. Box 2149 MAILING **ADDRESS** Euless, TX 76039 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 546-1820 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 10 PERIOD Year 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)
Texans For Responsible	e Education PAC		00085808	3
14 COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(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	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	225.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	349.44
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY     OF THE REPORTING PERIOD		DAY \$	913.30
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	l		L	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Broo	ly Mulligan	
		Signature of Ca		urer
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Se	ampaign rreas	
		, t	his the	day
ot	_, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer add	ministering oath	Printed name of officer administering oath	Title of off	icer administering oath

### **SUBTOTALS - GPAC**

# FORM **GPAC**COVER SHEET PG 3

			3 of 6
17 COMMITT	EE NAME for Responsible Education PAC	<b>18</b> Filer ID 00085808	(Ethics Commission Filers)
	E SUBTOTALS		
NAME OF	SUBTOTAL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 225.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	)R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 349.44
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$
I			

	MONET	TARY POLITICAL CONTRIBUTION	ΛC	IS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/6
2	FILER NAME Texans For Responsible Education PAC			3	Filer ID (Ethics Commission Filers) 00085808	
4	Date  5 Full name of contributor out-of-state PAC (ID#:)  Hastings, Sean  6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$) \$225.00	
8	Principal occu	Haslett, MI 48840 upation / Job title (See Instructions)	9	Employer (See Instructions Student	s)	

### 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)

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 1/2 Rpt: 5/6	Texans For Responsible Education PAC	00085808				
4	Date	5 Payee name					
	06/30/2023	ACT BLUE / VANTIV					
6	Amount (\$)	7 Payee address; City; State; Zip Co	de				
	\$17.44	366 Summer St					
	Expenditure from corporate funds	Somerville, MA 02114					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Fees		Check if travel outside of Texas. Complete Schedule T.			
				Check if Austin, TX, officeholder living expense  Merchant Card Services / Processing Fees			
				Were that the General Services / 1 recessing 1 ces			
9	Complete ONLY if direct expenditure to benefit C/Oh	L L Candidate/Officeholder name Office sou H	ght	Office held			
	Date	Payee name					
	06/30/2023	Frost Bank, National Association					
	Amount (\$)	Payee address; City; State; Zip Co	de				
	\$72.00	P.O. Box 1600					
_	- Evpanditura from						
	Expenditure from corporate funds	San Antonio, TX 78245					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.			
				Check if Austin, TX, officeholder living expense  Banking Account Fees			
				Darming / toodant / CCS			
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held			
	expenditure to benefit C/O		•				
	Date	Payee name					
	06/15/2023	Google Domains					
	Amount (\$)	Payee address; City; State; Zip Co	de				
	\$20.00	1600 Amphitheatre Parkway					
	Expenditure from corporate funds	Mountain View, CA 94043					
	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			
				Domain Renewal Fee			
	Commission ONII V if dispost	Condidate/Officeholder page		Office hold			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soul H	yııı	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

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

t/Reimbursement Solicitation/Fundraising Expense
1/Rental Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Texans For Responsible Education PAC	00085808
5 Payee name	
The United States Postal Service	
7 Payee address; City; State; Zip C	code
210 N. Ector Dr	
Euless, TX 76039	
(a) Category (See Categories listed at the top of this schedule)	(b) Description
Fees	Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	PO Box Fee
Candidate/Officeholder name Office so	ught Office held
((	Payee address; City; State; Zip C 210 N. Ector Dr  Euless, TX 76039  a) Category (See Categories listed at the top of this schedule) Fees