

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1 Filer ID</b> (Ethics Commission Filers) 00083794	<b>2 Total pages filed:</b> 10
<b>3 COMMITTEE NAME</b> Young Dems BCS		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 07/17/2023	
<b>4 COMMITTEE ADDRESS</b>  <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 10904  College Station, TX 77840	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
<b>5 CAMPAIGN TREASURER NAME</b>		MS / MRS / MR FIRST MI Mrs. Sara Michelle  NICKNAME LAST SUFFIX DeMus	
<b>6 CAMPAIGN TREASURER STREET ADDRESS</b> <small>(Residence or Business)</small>		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2920 Kent Street Apt. 154 Bryan, TX 77845	
<b>7 CAMPAIGN TREASURER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2920 Kent Street Apt. 154 Bryan, TX 77845	
<b>8 CAMPAIGN TREASURER PHONE</b>		AREA CODE PHONE NUMBER EXTENSION (972) 979-3647	
<b>9 REPORT TYPE</b>		<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	
<b>10 PERIOD COVERED</b>		Month Day Year      Month Day Year 01/01/2023      THROUGH      06/30/2023	
<b>11 ELECTION</b>		ELECTION DATE      ELECTION TYPE Month Day Year <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 07/15/2023 <input type="checkbox"/> General <input type="checkbox"/> Special	

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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Young Dems BCS	<b>13 Filer ID</b> (Ethics Commission Filers) 00083794
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$	0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold		
	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$	310.00
<b>EXPENDITURE TOTALS</b>	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$	0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$	20.00
<b>CONTRIBUTION BALANCE</b>	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$	20.00
<b>OUTSTANDING LOAN TOTALS</b>	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$	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.

Mrs. Sara Michelle DeMus  
\_\_\_\_\_  
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

<b>17 COMMITTEE NAME</b> Young Dems BCS		<b>18 Filer ID</b> (Ethics Commission Filers) 00083794
<b>19 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 310.00
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	\$ 20.00
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 checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 275.44
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/3 Rpt: 4/10
<b>2</b> FILER NAME Young Dems BCS		<b>3</b> Filer ID (Ethics Commission Filers) 00083794
<b>4</b> Date 01/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Christner, Cynthia	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  TX		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Christner, Cynthia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Christner, Cynthia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Christner, Cynthia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Christner, Cynthia	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/3 Rpt: 5/10
<b>2</b> FILER NAME Young Dems BCS		<b>3</b> Filer ID (Ethics Commission Filers) 00083794
<b>4</b> Date 06/10/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Christner, Cynthia	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  TX		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) DeMus,	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Machinski, Doris	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Machinski, Doris	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Machinski, Doris	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  TX		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/3 Rpt: 6/10
<b>2</b> FILER NAME Young Dems BCS		<b>3</b> Filer ID (Ethics Commission Filers) 00083794
<b>4</b> Date 04/15/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Machinski, Doris <hr/> <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 05/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Machinski, Doris <hr/> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Machinski, Doris <hr/> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pena, Rafael <hr/> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/1 Rpt: 7/10	<b>2</b> FILER NAME Young Dems BCS	<b>3</b> Filer ID (Ethics Commission Filers) 00083794
<b>4</b> Date 04/21/2023	<b>5</b> Payee name Chil	
<b>6</b> Amount (\$) \$20.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code  TX	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</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 CSAT Decrim run by the organization Chil
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/3 Rpt: 8/10	2 FILER NAME Young Dems BCS	3 Filer ID (Ethics Commission Filers) 00083794
4 Date 01/23/2023	5 Payee name Squarespace	
6 Amount (\$)  31.39 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip  TX	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Website
Date 02/14/2023	Payee name Squarespace	
Amount (\$)  31.39 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip  TX	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Website
Date 03/14/2023	Payee name Squarespace	
Amount (\$)  31.39 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip  TX	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Website
Date 04/14/2023	Payee name Squarespace	
Amount (\$)  31.39 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip  TX	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Website



# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 2/3 Rpt: 9/10	<b>2</b> FILER NAME Young Dems BCS	<b>3</b> Filer ID (Ethics Commission Filers) 00083794
<b>4</b> Date 05/15/2023	<b>5</b> Payee name Squarespace	
<b>6</b> Amount (\$) 31.39 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip  TX	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Advertising Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Website
Date 06/14/2023	Payee name Squarespace	
Amount (\$) 31.39 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip  TX	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Website
Date 06/29/2023	Payee name Squarespace	
Amount (\$) 20.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip  TX	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Website
Date 02/26/2023	Payee name Zoom	
Amount (\$) 15.98 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip  TX	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Zoom for members to join meetings remotely

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/3 Rpt:	2 FILER NAME Young Dems BCS	3 Filer ID (Ethics Commission Filers) 00083794
4 Date 03/06/2023	5 Payee name Zoom	
6 Amount (\$)  17.04 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip  TX	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) zoom for members to join remotely
Date 04/06/2023	Payee name Zoom	
Amount (\$)  17.04 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip  TX	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) For members to join meetins remotely
Date 05/08/2023	Payee name Zoom	
Amount (\$)  17.04 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip  TX	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) for members to join meeting remotely