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) 00069636 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Association of Consumer Lawyers PAC Date Received **ELECTRONICALLY FILED** 07/17/2023 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **ADDRESS** 1005 Congress Avenue, Suite 1000 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78701 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Irma NAME NICKNAME LAST **SUFFIX** Reyes STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 3715 South First Street STREET **ADDRESS** #265 (Residence or Business) Austin, TX 78704 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1005 Congress Ave., Ste. 1000 MAILING **ADDRESS** Austin, TX 78701 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (830) 335-1400 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 11/07/2023 χ 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)
Texas Association of (Consumer Lawyers PAC		00069636	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported The Honorable Sheila Jackson	Lee Houstor	n Mayor
(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		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	O 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)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	60.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	10,179.94
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		<u>'</u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Ms. Irm	ıa Reyes	
		Signature of Ca	mpaign Treasur	er
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said _	, tl	nis the	day
		which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of office	er administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

					3 of 8
17 CO	MMITTI	EE NAME	18 Filer ID	(Ethics Commis	ssion Filers)
Te	as As				
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE					AL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO)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.	X	SCHEDULE E: LOANS		\$	0.00
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	10,179.94
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
				•	

PLE	DGED CONTRIBU	TIONS				SCHEDULE B	
The Instruction Guide explains how to complete this form.				1	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/8		
2 FILER N	IAME			3		Commission Filers)	
Texas A	Association of Consumer Law	yers PAC			00069636		
4 TOTAL	TOTAL OF UNITEMIZED PLEDGES				\$	0.00	
5 Date	6 Full name of pledgor	out-of-state PAC (I	D#:	_) 8	Amount of 9	In-kind description	
					pledge (\$)	(If applicable)	
	7 Pledgor Address;	City; State; Zip Co	ode				
					Check if travel outside	of Texas. Complete Schedule T.	
10 Principa	l occupation / Job title (See Instru	uctions)	11 Employer (See In	struction	ons)		

	LOANS					SCHEDUI	ΕE	
	The Instruction	struction Guide explains how to complete this form.				Total pages Schedule E: Sch: 1/1 Rpt: 5/8		
2	FILER NAME Texas Associati	ILER NAME exas Association of Consumer Lawyers PAC			3 Filer ID (Ethics Commission Filers) 00069636			
4		INITEMIZED LOANS			\$	0.00		
5	Date of loan	7 Name of lender out-of-state PAC (ID#:		C (ID#:		9 Loan Amount (\$)		
6	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Rate		
						11 Maturity Date		
12	Principal occupati	on / Job title (See Instructions)		13 Employer (See Instruc	tions)			
14	Description of Col	lateral		15 Check if personal funds were deposited into political account (See Instructions)				
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guarante	ed (\$)	
	not applicable	18 Guarantor address; City;	State;	Zip Code				
20	Principal occupati	on		21 Employer (See Instruc	ctions)			

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 (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	<u> </u>
Sch: 1/3 Rpt: 6/8	Texas Association of Consumer Lawyers PAC 00069636
4 Date	5 Payee name
06/02/2023	PayPal
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$19.99	2211 North First Street
Expenditure from corporate funds	San Jose, CA 95131
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
	Fees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
05/02/2023	PayPal
Amount (\$)	Payee address; City; State; Zip Code
\$19.99	2211 North First Street
— F	
Expenditure from corporate funds	San Jose, CA 95131
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
04/03/2023	PayPal
Amount (\$)	Payee address; City; State; Zip Code
\$19.99	2211 North First Street
Ψ13.33	ZZII NOITH IISt Street
Expenditure from corporate funds	San Jose, CA 95131
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	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (parter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	ll 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: 2/3 Rpt: 7/8	Texas Association of Consumer Lawyers PAC 00069636	
4 Date	5 Payee name	
03/03/2023	PayPal	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$19.99	2211 North First Street	
Expenditure from corporate funds	San Jose, CA 95131	
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 Fees	
	1 663	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		
		_
Date	Payee name	
02/02/2023	PayPal	
Amount (\$)	Payee address; City; State; Zip Code	
\$19.99	2211 North First Street	
Expenditure from corporate funds	San Jose, CA 95131	
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	
	Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experientare to benefit 6/61	<u> </u>	
Date	Payee name	
01/03/2023	PayPal	
Amount (\$)	Payee address; City; State; Zip Code	_
\$19.99	2211 North First Street	
Expenditure from corporate funds	San Jose, CA 95131	
·		
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	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Fees	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
<u> </u>		

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

\$10,000.00

Sch: 3/3 Rpt: 8/8

4 Date

8

06/27/2023

Expenditure from

PURPOSE

OF

EXPENDITURE

Complete ONLY if direct

corporate funds

6 Amount (\$)

Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Texas Association of Consumer Lawyers PAC 00069636 Payee name Sheila Jackson Lee for Mayor Payee address; City; State; Zip Code 4412 Almeda Road Houston, TX 77004 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Political Contribution Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH