

**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)

2 Total pages filed: 8

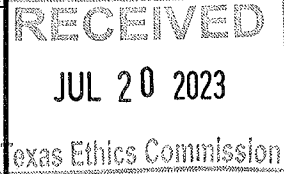
0016852

including affidavit

3 COMMITTEE NAME THE TEXAS COTTON ASSOCIATION
COTTON MERCHANTS FUND

OFFICE USE ONLY

Date Received



4 COMMITTEE ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

Change of Address

P.O. BOX 765098
DALLAS, TX 75376-5098

Date Hand-delivered or Date Postmarked

7/20/23

Receipt # Amount \$

5 CAMPAIGN TREASURER NAME

MS / MRS / MR FIRST MI
KANDICE E
NICKNAME LAST SUFFIX
KANDI POTEET

Date Processed

7/24/23

Date Imaged

6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

943 ROCK CANYON DR.
DUNCANVILLE, TX 75137

7 CAMPAIGN TREASURER MAILING ADDRESS

STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

Change of Address

P.O. BOX 765098
DALLAS, TX 75376-5098

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(972) 283-2822

9 REPORT TYPE

- January 15 30th day before election Dissolution Report (Attach PAC-DR)
 July 15 8th day before election 10th day after campaign treasurer termination
 Runoff

10 PERIOD COVERED

Month Day Year Month Day Year

01 / 01 / 2023 THROUGH 06 / 30 / 2023

11 ELECTION

ELECTION DATE
Month Day Year
/ /

ELECTION TYPE

- Primary Runoff Other
 General Special Description _____

GO TO PAGE 2

18

D: 100915357

**GENERAL-PURPOSE COMMITTEE
PURPOSE AND TOTALS**

**FORM GPAC
COVER SHEET PG 2**

12 COMMITTEE NAME <u>THE TEXAS COTTON ASSOCIATION COTTON MERCHANTS FUND</u>		13 Filer ID (Ethics Commission Filers) <u>0016852</u>
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	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>600.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>0</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>5,877.46</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

16 SIGNATURE 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.

Kandice E. Poteet
Signature of Campaign Treasurer (Declarant)

Please complete either option below:

(1) Affidavit

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 _____

OR

(2) Unsworn Declaration

My name is KANDICE E. POTEET, and my date of birth is _____
My address is 943 ROCK CANYON DR. DUNCANVILLE TX 75131 USA
(street) (city) (state) (zip code) (country)
Executed in DALLAS County, State of TX, on the 15th day of JULY, 2023.
(month) (year)

Kandice E. Poteet
Signature of Campaign Treasurer (Declarant)

SUBTOTALS - GPAC

**FORM GPAC
COVER SHEET PG 3**

17 COMMITTEE NAME <i>THE TEXAS COTTON ASSOCIATION COTTON MERCHANTS FUND</i>		18 Filer ID (Ethics Commission Filers) <i>0016852</i>
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>600.00</i>
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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>.26</i>

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>2</u>
2 FILER NAME <u>THE TEXAS COTTON ASSOCIATION COTTON MERCHANTS FUND</u>		3 Filer ID (Ethics Commission Filers) <u>0016852</u>
4 Date <u>4/5/23</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>BRADY RAINOL</u>	7 Amount of contribution (\$) <u>\$100</u>
	6 Contributor address; City; State; Zip Code [REDACTED] <u>LUBBOCK TX 79404</u>	
8 Principal occupation / Job title (See Instructions) <u>COTTON TRADER, BUYER</u>		9 Employer (See Instructions) <u>ECOM USA INC, LUBBOCK office</u>
Date <u>4/24/23</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>ELIZABETH CHANDLER</u>	Amount of contribution (\$) <u>\$50</u>
	Contributor address; City; State; Zip Code [REDACTED] <u>PLANO TX 75240</u>	
Principal occupation / Job title (See Instructions) <u>MGR. COTTON MERCHANT, LOGISTIC</u>		Employer (See Instructions) <u>ECOM USA, INC., DALLAS office</u>
Date <u>4/26</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>ELLEN BATCHELDER</u>	Amount of contribution (\$) <u>\$250.00</u>
	Contributor address; City; State; Zip Code [REDACTED] <u>PALACIOS, TX 77465</u>	
Principal occupation / Job title (See Instructions) <u>COTTON MERCHANT, TRADER</u>		Employer (See Instructions) <u>CARGILL COTTON, PALACIOS office</u>
Date <u>5/8/23</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>BEALL STEPHENSON</u>	Amount of contribution (\$) <u>\$100.00</u>
	Contributor address; City; State; Zip Code [REDACTED] <u>Plano, Tx 75025</u>	
Principal occupation / Job title (See Instructions) <u>COTTON MERCHANT, SR. V.P.</u>		Employer (See Instructions) <u>OMNICOOTON, INC., RICHARDSON, TX</u>

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <u>2</u>
2 FILER NAME <u>THE TEXAS COTTON ASSOCIATION COTTON MERCHANTS FUND</u>		3 Filer ID (Ethics Commission Filers) <u>0016852</u>
4 Date <u>5/14/23</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>RAY RAGSDALE</u>	7 Amount of contribution (\$) <u>\$100</u>
	6 Contributor address; City; State; Zip Code <u>[REDACTED] MOODY, TX 76557</u>	
8 Principal occupation / Job title (See Instructions) <u>COTTON MERCHANT, OWNER</u>		9 Employer (See Instructions) <u>MEMTEX, BELTON, TX</u>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: 2
2 FILER NAME THE TEXAS COTTON ASSOCIATION COTTON MERCHANTS FUND		3 Filer ID (Ethics Commission Filers) 0016852
4 Date 1/31/23	5 Name of person from whom amount is received BANK OF AMERICA, N.A.	8 Amount (\$) .04
	6 Address of person from whom amount is received; City; State; Zip Code P.O. BOX 25118 TAMPA, FL 33622-5118	
7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer bank interest		
Date 2/28/23	Name of person from whom amount is received BANK OF AMERICA, N.A.	Amount (\$) .04
	Address of person from whom amount is received; City; State; Zip Code P.O. BOX 25118 TAMPA, FL 33622-5118	
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer bank interest		
Date 3/31/23	Name of person from whom amount is received BANK OF AMERICA, N.A.	Amount (\$) .04
	Address of person from whom amount is received; City; State; Zip Code P.O. BOX 25118 TAMPA, FL 33622-5118	
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer bank interest		
Date 4/28/23	Name of person from whom amount is received BANK OF AMERICA, N.A.	Amount (\$) .04
	Address of person from whom amount is received; City; State; Zip Code P.O. BOX 25118 TAMPA, FL 33622-5118	
Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer bank interest		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: <u>2</u>
2 FILER NAME <u>THE TEXAS COTTON ASSOCIATION COTTON MERCHANT FUND</u>		3 Filer ID (Ethics Commission Filers) <u>0016852</u>
4 Date <u>5/31/23</u>	5 Name of person from whom amount is received <u>BANK OF AMERICA, N.A.</u>	8 Amount (\$) <u>.05</u>
	6 Address of person from whom amount is received; City; State; Zip Code <u>P.O. BOX 25118 TAMPA, FL 33622-5118</u>	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer <u>bank interest</u>	
Date <u>6/30/23</u>	Name of person from whom amount is received <u>BANK OF AMERICA, N.A.</u>	Amount (\$) <u>.05</u>
	Address of person from whom amount is received; City; State; Zip Code <u>P.O. BOX 25118 TAMPA, FL 33622-5118</u>	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		



AFFIDAVIT FOR COMMITTEE: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2022, a campaign treasurer of a political committee that has accepted more than \$28,800 in political contributions or made more than \$28,800 in political expenditures in any calendar year must file all subsequent reports electronically.

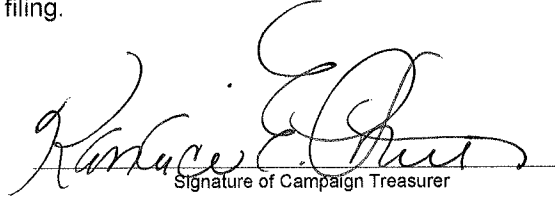
Filer name <u>THE TEXAS COTTON ASSN. COTTON MERCHANTS FUND</u>	Filer ID # <u>0016852</u>
---	------------------------------

OFFICE USE ONLY	
Date Received RECEIVED JUL 20 2023 Texas Ethics Commission	
Date Hand-delivered or Date Postmarked	
Receipt #	Amount \$
Date Processed	
Date Imaged	

- I swear or affirm that the political committee of which I am the campaign treasurer has not accepted more than \$28,800 in political contributions or made more than \$28,800 in political expenditures in a calendar year.
- I further swear or affirm that the political committee of which I am the campaign treasurer does not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee.
- I further swear or affirm that no person acting as the committee's agent or consultant, and no person with whom the committee contracts, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee.
- I further swear or affirm that I understand that I am required to file the committee's campaign finance reports electronically if the committee, the committee's agent or consultant, or a person with whom the committee contracts exceeds \$28,800 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee.
- I am filing this affidavit with the GPAC report due on JULY 15, 2023. I understand that this affidavit is required to be filed with each campaign finance report for which the committee is claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit

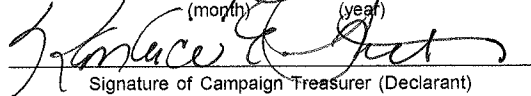

Signature of Campaign Treasurer

NOTARY STAMP / SEAL
Sworn to and subscribed before me by _____ 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

OR

(2) Unsworn Declaration

My name is KANDICE E. POTEET, and my date of birth is [REDACTED].
My address is 943 ROCK CANYON DR. DUNCANVILLE TX 75137 USA
(street) (city) (state) (zip code) (country)
Executed in DALLAS County, State of TEXAS, on the 15th day of JULY, 2023.
(month) (year)

Signature of Campaign Treasurer (Declarant)

**FILERS WHO ARE EXEMPT FROM THE ELECTRONIC FILING REQUIREMENT
ARE STILL REQUIRED TO FILE CAMPAIGN FINANCE REPORTS ON PAPER**



Texas Cotton
ASSOCIATION

P.O. Box 765098
Dallas, Texas, 75376-5098

TEXAS ETHICS COMMISSION
SAM HOUSTON BLDG.

201 East 14th St, 10th Floor
AUSTIN, TX 78701

RECEIVED
JUL 20 2023
Texas Ethics Commission

PRESS FIRMLY TO SEAL



PRESS FIRMLY TO SEAL



Retail



U.S. POSTAGE
PME 1-Day
DUNCANVILLE,
JUL 17, 2023

78701

\$28.75

RDC 07

R2305M146630-C

PRIORITY MAIL EXPRESS®



PRIORITY MAIL EXPRESS®

CUSTOMER USE ONLY
FROM: (PLEASE PRINT)

PHONE 241 537 5330
THE TEXAS COTTON ASSOCIATION
Kandice E. Pofert
943 ROCK CANYON DR.
DUNCANVILLE, TX 75137

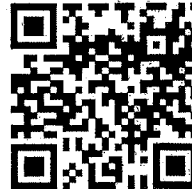
DELIVERY OPTIONS (Customer Use Only)

SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

No Saturday Delivery (delivered next business day)
 Sunday/Holiday Delivery Required (additional fee, where available)
*Refer to USPS.com® or local Post Office™ for availability.

TO: (PLEASE PRINT)

To schedule free Package Pickup, scan the QR code.



USPS.COM/PICKUP

PEEL FROM THIS CORNER



EP13F July 2022



EI 619 204 917 US

PAYMENT BY ACCOUNT (if applicable)

USPS® Corporate Acct. No. Federal Agency Acct. No. or Postal Service™ Acct. No.

ORIGIN (POSTAL SERVICE USE ONLY)

PO ZIP Code	78701	Schedule Delivery Date (MM/DD/YYYY)	7/18/23	Postage	\$ 28.75
Date Accepted (MM/DD/YYYY)	7/17/23	Schedule Delivery Time	6:00 PM	Insurance Fee	\$
Time Accepted	5:08 PM	Special Handling/Fragile		Return Receipt Fee	\$
Weight	3 lbs. 3 ozs.	Acceptance Employee Initials	GD	Live Animal Transportation Fee	\$
Special Handling/Fragile		Delivery Attempt (MM/DD/YYYY) Time		Employee Signature	
Weight		Delivery Attempt (MM/DD/YYYY) Time		Employee Signature	
Special Handling/Fragile		Sunday/Holiday Premium Fee		Total Postage & Fees	\$ 28.75

LABEL 11-B, MAY 2021 FSN 7530-02-000-9996