#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00067374 3 COMMITTEE NAME **OFFICE USE ONLY** Cypress-Tomball Democrats Date Received **ELECTRONICALLY FILED** 01/02/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 16215 DIAMOND ROCK Change of Address CYPRESS, TX 77429 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Mr. Robert L. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Mahan CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 16215 Diamond Rock Dr. STREET **ADDRESS** (Residence or Business) Cypress, TX 77429-2645 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 16215 Diamond Rock Dr. MAILING **ADDRESS** Change of Address Cypress, TX 77429-2645 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 291-7395 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY X January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 11/26/2023 12/25/2023

### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

|   |  |   |   | _                                    |   |
|---|--|---|---|--------------------------------------|---|
| L2 COMMITTEE NAME   |  |   |   | 13 Filer ID                          | (Ethics Commission Filers)                        |
| Cypress-Tomball Demo  | ocrats   |   |   | 0006737                              | <b>'</b> 4  |
| 4 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.)                   | 7. Supported  |   |                                      |   |
|   |  | B. Opposed  |   |                                      |   |
|   | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) |   |   |                                      |   |
|   | 1  |   |   |                                      |   |
| 5 CONTRIBUTION<br>TOTALS  | PLEDGES, LOANS,<br>CONTRIBUTIONS N   | D POLITICAL CONTF<br>OR GUARANTEES (<br>MADE ELECTRONICA<br>qualifies for the higher it | ALLY)   | \$                                   | 0.00  |
|   | 2. TOTAL POLITICA<br>(OTHER THAN PLEI  |   | NS<br>GUARANTEES OF LOANS)  | \$                                   | 545.00  |
| EXPENDITURE<br>TOTALS   | 3. TOTAL UNITEMIZED  | D POLITICAL EXPEN   | IDITURES  | \$                                   | 0.00  |
|   | 4. TOTAL POLITICA  | L EXPENDITURES  | S   | \$                                   | 0.00  |
| CONTRIBUTION<br>BALANCE   | 5. TOTAL POLITICAL (<br>OF THE REPORTIN  |   | AINTAINED AS OF THE LAST  | T DAY \$                             | 4,740.77  |
| OUTSTANDING<br>LOAN TOTALS  |  | AMOUNT OF ALL OU<br>REPORTING PERIO   | JTSTANDING LOANS AS OF<br>D   | THE \$                               | 0.00  |
| 6 AFFIDAVIT   | 1  |   |   |                                      |   |
|   |  | true ar   | ur, or affirm, under penalty of p<br>nd correct and includes all info<br>Title 15, Election Code. | perjury, that the<br>ormation requir | e accompanying report is red to be reported by me |
|   |  |   | Mr. Robe  | ert L. Mahan                         |   |
|   |  |   | Signature of C  | ampaign Treas                        | surer   |
| AFFIX NOTARY  | STAMP / SEAL ABOVE   |   |   |                                      |   |
| Sworn to and subscribed   | hefore me, by the said   |   | ,   | this the                             | day   |
|   | _, 20, to certify \  |   |   |                                      | day   |
|   | <u> </u>   | , , , , , ,   |   |                                      |   |
| Signature of officer ad   | ministering oath   | Printed name of offic   | er administering oath   | Title of of                          | fficer administering oath                         |

### **SUBTOTALS - MPAC**

## FORM MPAC COVER SHEET PG 3

|   |   |  |                             |                    | 3 of 8   |
|---|---|--|-----------------------------|--------------------|----------|
| 17 COMN                                 |   | E NAME omball Democrats  | <b>18</b> Filer ID 00067374 | (Ethics Commission | Filers)  |
|   |   |  | 00007011                    | T                  |          |
| 19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE |   |  |                             |                    | IOUNT    |
| 1. [                                    | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS |  |                             | \$                 | 545.00   |
| 2.                                      |   | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        |                             | \$                 |          |
| 3.                                      |   | SCHEDULE B: PLEDGED CONTRIBUTIONS  |                             | \$                 |          |
| 4.                                      |   | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO<br>ORGANIZATION       | DR                          | \$                 |          |
| 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.                                     |   | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION                    | S                           | \$                 |          |
| 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.                                     | Х   | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION                 | ONS                         | \$                 | 1,961.91 |
| 15.                                     |   | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER          | RETURNED                    | \$                 |          |
|   |   |  |                             |                    |          |

|   | MONET   | ARY POLITICAL CONTRIBUTI  | ONS  |                             | SCHEDUL                                       | E <b>A1</b> |
|---|---|---|--|-----------------------------|---|-------------|
|   | The Instruc   | ction Guide explains how to complete this   | form.  | 1                           | Total pages Schedule A1:<br>Sch: 1/4 Rpt: 4/8 |             |
| 2   | FILER NAME Cypress-Ton  | nball Democrats   |  | 3                           | Filer ID (Ethics Commission 00067374          | n Filers)   |
| 4   | Date 12/14/2023  5 Full name of contributor out-of-state PAC (ID#:) Bord, Stephanie  6 Contributor address; City; State; Zip Code |   | 7  | Amount of Contribution (\$) | \$25.00                                       |             |
| _   | Delicational  | Spring, TX 77379  | Section (Contraction                         |                             |   |             |
| 8   | Unemployed  | pation / Job title (See Instructions)   | 9 Employer (See Instructions                 | S)                          |   |             |
| Date Full name of contributor out-of-state PAC (ID#:)  12/14/2023 Broadnax, Desiree  Contributor address; City; State; Zip Code |   |   | Amount of Contribution (\$)                  | \$25.00                     |   |             |
|   | Principal occu  | Houston, TX 77049 Dation / Job title (See Instructions)   | Employer (See Instructions                   | <br>s)                      |   |             |
|   | Division Man  | ager  | HCDA   |                             |   |             |
|   | Date Full name of contributor out-of-state PAC (ID#:)  12/14/2023 Chambers, Carole  Contributor address; City; State; Zip Code    |   |  | Amount of Contribution (\$) | \$25.00                                       |             |
|   |   | Houston, TX 77084   |  |                             |   |             |
|   | Principal occu<br>unemployed  | pation / Job title (See Instructions)   | Employer (See Instructions                   | s)                          |   |             |
|   | Date<br>12/14/2023  | Full name of contributor out-of-state PAC (ID# Gardner, Judith Contributor address; City; State; Zip Code  Tomball, TX 77377          | <i>t</i> :)                                  |                             | Amount of Contribution (\$)                   | \$40.00     |
|   | Principal occu<br>unemployed  | pation / Job title (See Instructions)   | Employer (See Instructions                   | s)                          |   |             |
|   | Date<br>12/14/2023  | Full name of contributor out-of-state PAC (ID# Garris, Patricia & Dagon  Contributor address; City; State; Zip Code  Spring, TX 77379 | <u>;                                    </u> |                             | Amount of Contribution (\$)                   | \$100.00    |
|   | Principal occu<br>retired   | oation / Job title (See Instructions)   | Employer (See Instructions                   | s)                          |   |             |
|   |   |   | •  |                             |   |             |

|   | MONET                        | ARY POLITICAL CONTRIB  | BUTION                      | NS  |                | SCHEDULI                                      | E <b>A1</b> |
|---|------------------------------|--|-----------------------------|---|----------------|---|-------------|
|   | The Instruc                  | ction Guide explains how to complete   | e this for                  | m.  | 1              | Total pages Schedule A1:<br>Sch: 2/4 Rpt: 5/8 |             |
| 2   | FILER NAME Cypress-Ton       | nball Democrats  |                             |   | 3              | Filer ID (Ethics Commission 00067374          | ı Filers)   |
| 4   |                              |  | 7                           | Amount of Contribution (\$)                   | \$25.00        |   |             |
| _   |                              | Houston, TX 77070  |                             |   |                |   |             |
| 8   | Principal occu<br>unemployed | pation / Job title (See Instructions)  | 9                           | Employer (See Instructions                    | 5)             |   |             |
| Date Full name of contributor out-of-state PAC (ID#:)  12/14/2023 Greene, David  Contributor address; City; State; Zip Code |                              |  | Amount of Contribution (\$) | \$40.00                                       |                |   |             |
|   | Principal occu               | Katy, TX 77449 pation / Job title (See Instructions)   |                             | Employer (See Instructions                    | <u> </u>       |   |             |
|   | General Man                  | ager   |                             | Trenton Hoyt, LLC                             |                |   |             |
| Date Full name of contributor out-of-state PAC (ID#:)  12/14/2023 Hart, James  Contributor address; City; State; Zip Code   |                              |  | Amount of Contribution (\$) | \$25.00                                       |                |   |             |
|   |                              | Cypress, TX 77429  |                             |   |                |   |             |
|   | Principal occu<br>unemployed | pation / Job title (See Instructions)  |                             | Employer (See Instructions                    | 5)             |   |             |
|   | Date<br>12/14/2023           | Full name of contributor out-of-state F Jennings, Rodney  Contributor address; City; State; Zip Code  Spring, TX 77379 | -                           | )   |                | Amount of Contribution (\$)                   | \$40.00     |
|   | Principal occu<br>telesales  | pation / Job title (See Instructions)  |                             | Employer (See Instructions Centerpoint Energy | <u>I</u><br>5) |   |             |
|   | Date<br>12/05/2023           | Full name of contributor out-of-state F Jimenez, Marisela Contributor address; City; State; Zip Code Spring, TX 77389  | PAC (ID#:                   |   |                | Amount of Contribution (\$)                   | \$25.00     |
|   | Principal occu<br>unemployed | pation / Job title (See Instructions)  |                             | Employer (See Instructions                    | 5)             |   |             |
|   |                              |  | '                           |   |                |   |             |

|   | MONEI  | ARY POLITICAL CONT  | RIBUTIONS                 |                             | SCHEDULE                                      | <b>■ A1</b> |
|---|--|---|---------------------------|-----------------------------|---|-------------|
|   | The Instruc  | ction Guide explains how to con   | plete this form.          | 1                           | Total pages Schedule A1:<br>Sch: 3/4 Rpt: 6/8 |             |
| 2 | FILER NAME   |   |                           | 3                           | Filer ID (Ethics Commission                   | Filers)     |
|   |  | ball Democrats  |                           |                             | 00067374                                      |             |
| 4 | Date<br>12/14/2023   | 5 Full name of contributor out-of-state PAC (ID#:)  Johnston, Jillian  6 Contributor address; City; State; Zip Code |                           | 7                           | Amount of Contribution (\$)                   | \$25.00     |
| _ | Dringing aggu  | Simonton, TX 77476  | 6 Employer /              | Soo Instructions)           |   |             |
| 0 | unemployed   | pation / Job title (See Instructions)   | 9 Employer (S             | See Instructions)           |   |             |
|   | Date Full name of contributor out-of-state PAC (ID#:)  12/14/2023 Kitchens, Marillyn  Contributor address; City; State; Zip Code |   |                           | Amount of Contribution (\$) | \$25.00                                       |             |
|   |  | Houston, TX 77069   |                           |                             |   |             |
|   | unemployed   | pation / Job title (See Instructions)   | Employer (S               | See Instructions)           |   |             |
|   | Date<br>12/14/2023   | Full name of contributor out-of Coblenz, Deanna  Contributor address; City; State; Zip C                            | state PAC (ID#:           | )                           | Amount of Contribution (\$)                   | \$25.00     |
|   |  | Tomball, TX 77377   |                           |                             |   |             |
|   | Principal occu<br>Retired  | pation / Job title (See Instructions)   | Employer (S               | See Instructions)           |   |             |
|   | Date<br>12/14/2023   | Full name of contributor out-of Malik, Nasir  Contributor address; City; State; Zip C                               | state PAC (ID#:           | )                           | Amount of Contribution (\$)                   | \$25.00     |
|   | Principal occup<br>Business ow   | oation / Job title (See Instructions)<br>ner  | Employer (S               | See Instructions)           |   |             |
|   | Date<br>12/14/2023   | Syed, Sarah   | state PAC (ID#:           | )                           | Amount of Contribution (\$)                   | \$25.00     |
|   | Principal occu<br>Manager  | oation / Job title (See Instructions)   | Employer (\$<br>Woori Jun | See Instructions)<br>tos    |   |             |
|   |  |   | •                         |                             |   |             |

| ONET   | ARY POLITICAL CONTRIBUTION  | ONS   | SCHEDULE A1                                    |
|--|---|---|--|
| e Instru   | ction Guide explains how to complete this f   | form.   | Total pages Schedule A1:     Sch: 4/4 Rpt: 7/8 |
| R NAME   |   |   | 3 Filer ID (Ethics Commission Filers) 00067374 |
| Date  5 Full name of contributor out-of-state PAC (ID#:)  Thomas, Gion  6 Contributor address; City; State; Zip Code |   | 7 Amount of Contribution (\$) \$25.00   |  |
|  | Katy, TX 77493  |   |  |
| cipal occu<br>O  | pation / Job title (See Instructions)   | 9 Employer (See Instruction: P.O.P.   | is)  |
| e<br>L4/2023   | Full name of contributor out-of-state PAC (ID#: Trevino, Maria Contributor address; City; State; Zip Code |   | Amount of Contribution (\$) \$25.00            |
|  | Houston, TX 77023   |   |  |
| cipal occu<br>draiser  | pation / Job title (See Instructions)   | Employer (See Instruction:<br>Texas Civil Rights Proje  |  |
|  |   |   |  |
|  | e Instru ER NAME ress-Tor e4/2023   | Instruction Guide explains how to complete this formula in the series of the series. Tomball Democrats    Second Full name of contributor | S Full name of contributor                     |

## NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

### SCHEDULE I

| The Instruction Guide explains how to complete this form. |   |  |  |  |  |
|---|---|--|--|--|--|
| 1 Total pages Schedule I:                                 | 2 FILER NAME  | 3 Filer ID (Ethics Commission Filers)                                      |  |  |  |
| Sch: 1/1 Rpt: 8/8   | Cypress-Tomball Democrats   | 00067374   |  |  |  |
| 4 Date  | 5 Payee name  |  |  |  |  |
| 12/25/2023  | ActBlue Technical Services  |  |  |  |  |
| 6 Amount (\$)   | 7 Payee Address; City; State; Zip                                     |  |  |  |  |
| 21.56   | 366 Summer Street   |  |  |  |  |
| Expenditure from corporate funds                          | Somerville, MA 02144  |  |  |  |  |
| 8 PURPOSE   | (a) Category (See instructions for examples of acceptable categories) | (b) Description (See instructions regarding type of information required.) |  |  |  |
| OF<br>EXPENDITURE   | Accounting/Banking  | Processing fee   |  |  |  |
| EXI ENDITORE  |   |  |  |  |  |
|   |   |  |  |  |  |
| Date  | Payee name  |  |  |  |  |
| 12/14/2023  | Campioni Restaurant   |  |  |  |  |
| Amount (\$)   | Payee Address; City; State; Zip                                       |  |  |  |  |
| 1,769.25  | 13850 Cutten Road   |  |  |  |  |
| Expenditure from  |   |  |  |  |  |
| corporate funds   | Houston, TX 77069   |  |  |  |  |
| PURPOSE   | (a) Category (See instructions for examples of acceptable categories) | (b) Description (See instructions regarding type of information required.) |  |  |  |
| OF<br>EXPENDITURE   | Event Expense   | Christmas dinner   |  |  |  |
| EXPENDITORE   |   |  |  |  |  |
|   |   |  |  |  |  |
| Date  | Payee name  |  |  |  |  |
| 12/14/2023  | Lorenz, Jennifer  |  |  |  |  |
| Amount (\$)   | Payee Address; City; State; Zip                                       |  |  |  |  |
| 108.03  | 14526 Cypress Falls   |  |  |  |  |
| Expenditure from  |   |  |  |  |  |
| corporate funds   | Cypress, TX 77429   |  |  |  |  |
| PURPOSE   | (a) Category (See instructions for examples of acceptable categories) | (b) Description (See instructions regarding type of information required.) |  |  |  |
| OF<br>EXPENDITURE   | Event Expense   | Flowers for Christmas Party  |  |  |  |
| LAFENDITORE   |   |  |  |  |  |
|   |   |  |  |  |  |
| Date  | Payee name  |  |  |  |  |
| 12/10/2023  | Steele, Elizabeth   |  |  |  |  |
| Amount (\$)   | Payee Address; City; State; Zip                                       |  |  |  |  |
| 63.07   | 12214 Moorcreek   |  |  |  |  |
| Expenditure from  |   |  |  |  |  |
| corporate funds   | Houston, TX 77070   |  |  |  |  |
| PURPOSE   | (a) Category (See instructions for examples of acceptable categories) | (b) Description (See instructions regarding type of information required.) |  |  |  |
| OF<br>EXPENDITURE   | Event Expense   | Christmas party decorations and supplies                                   |  |  |  |
| EXI ENDITORE  |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |