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) 00070105 3 COMMITTEE NAME **OFFICE USE ONLY** Planned Parenthood Texas Votes PAC Date Received **ELECTRONICALLY FILED** 01/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** PO BOX 41646 Change of Address Austin, TX 78704 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Ms. Marci NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Rosenberg CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2708 S Lamar Blvd Ste 200A STREET **ADDRESS** (Residence or Business) Austin, TX 78704 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** PO BOX 41646 MAILING **ADDRESS** Change of Address Austin, TX 78704 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 304-4749 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY X January 5 April 5 October 5 REPORT FILING July 5 **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 11/26/2023 12/25/2023 **GO TO PAGE 2**

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

| L2 COMMITTEE NAME | | | 1 | L3 Filer ID | (Ethics Commission Filers) |
|---|--|---|--|-------------------------------------|---|
| Planned Parenthood Te | exas Votes PAC | | | 00070105 | |
| 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 Managuras | A. Supported | | | |
| | 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.) | | | | |
| 5 CONTRIBUTION TOTALS | PLEDGES, LOANS, CONTRIBUTIONS N | D POLITICAL CONTRIBUTION OR GUARANTEES OF LOAN ADE ELECTRONICALLY) qualifies for the higher itemization | S, OR | \$ | 0.00 |
| | 2. TOTAL POLITICA | · | | \$ | 5,911.48 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED | POLITICAL EXPENDITURES | S | \$ | 126.12 |
| | 4. TOTAL POLITICA | L EXPENDITURES | | \$ | 6,764.76 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL (OF THE REPORTIN | CONTRIBUTIONS MAINTAINE G PERIOD | ED AS OF THE LAST D | DAY \$ | 74,692.61 |
| OUTSTANDING LOAN TOTALS | | AMOUNT OF ALL OUTSTAND REPORTING PERIOD | DING LOANS AS OF T | HE \$ | 0.00 |
| .6 AFFIDAVIT | I | | | <u> </u> | |
| | | I swear, or affirn true and correct under Title 15, E | n, under penalty of per and includes all inforn Election Code. | jury, that the a nation required | ccompanying report is I to be reported by me |
| | | | Ms. Marci I | Rosenberg | |
| | | | Signature of Can | npaign Treasu | rer |
| AFFIX NOTARY | STAMP / SEAL ABOVE | | | | |
| Sworn to and subscribed | before me, by the said | | . th | is the | day |
| | | which, witness my hand and se | | | |
| | | | | | |
| Signature of officer ad | ministering oath | Printed name of officer admini | istering oath | Title of offic | er administering oath |

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

| | | | | | 3 of 12 | | | | |
|--------------|-----------------------|--|--------------|--------------|-----------------|--|--|--|--|
| 17 CO | MMITTE | E NAME | 18 Filer ID | (Ethics Comm | nission Filers) | | | | |
| l | | Parenthood Texas Votes PAC | 00070105 | (= | , | | | | |
| 19 SC | 19 SCHEDULE SUBTOTALS | | | | | | | | |
| l | ME OF | | SUBTOT | AL AMOUNT | | | | | |
| | | | | | | | | | |
| 1. | X | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ | 5,911.48 | | | | |
| 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 CORPORALABOR 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. | Х | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION: | S | \$ | 5,504.45 | | | | |
| 11. | X | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | 1,260.31 | | | | |
| 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 | \$ | | | | | |
| | | | | | | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A1 | | |
|----------------------------------|---|---|-------------------------------------|--|-----------------------------|--|------------|
| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A1: Sch: 1/4 Rpt: 4/12 | |
| 2 | FILER NAME Planned Par | enthood Texas Votes PAC | | | 3 | Filer ID (Ethics Commission 00070105 | on Filers) |
| 4 | Date 12/04/2023 | | | 7 | Amount of Contribution (\$) | \$1,000.00 | |
| 8 | Principal occu professor an | Austin, TX 78701 pation / Job title (See Instructions) d consultant | 9 | Employer (See Instructions Self Employed | 5) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 11/29/2023 Alexander, Stacy Keaton Contributor address; City; State; Zip Code Austin, TX 78703 | | | Amount of Contribution (\$) | \$1,000.00 | | |
| | Principal occupation / Job title (See Instructions) Attorney Employer (See Instruction Self Employed | | | <u> </u> 5) | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 12/15/2023 Ausley, Robbie Holt Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$1,000.00 | |
| | Principal occu Retired | Austin, TX 78731 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> ;) | | |
| | Date 12/02/2023 | Full name of contributor Baker, Nathan Contributor address; City; Sta | out-of-state PAC (ID#:ate; Zip Code |) | | Amount of Contribution (\$) | \$2.00 |
| | Principal occu Attorney | pation / Job title (See Instructions) | | Employer (See Instructions Friends of the Columbia | | orge | |
| | Date 12/11/2023 | | | | Amount of Contribution (\$) | \$1.00 | |
| | Principal occu Attorney | pation / Job title (See Instructions) | | Employer (See Instructions Friends of the Columbia | | orge | |
| | | | | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A1 | | |
|----------------------------------|--|---|----------------|---|-----------------------------|--|------------|
| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A1: Sch: 2/4 Rpt: 5/12 | |
| 2 | FILER NAME Planned Par | enthood Texas Votes PAC | | | 3 | Filer ID (Ethics Commission 00070105 | on Filers) |
| 4 | Date 12/16/2023 | | | 7 | Amount of Contribution (\$) | \$18.00 | |
| 8 | Principal occu | Austin, TX 78748 pation / Job title (See Instructions) | l ₉ | Employer (See Instructions |) | | |
| | Retired | patient, cop the (coe mondetions) | | Retired | , | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 11/30/2023 Dobbs, Deborah K. Kristine Contributor address; City; State; Zip Code | | | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu | Austin, TX 78731 pation / Job title (See Instructions) | | Employer (See Instructions |) | | |
| | Retired | | | n/a | | | |
| | Date Full name of contributor out-of-state PAC (ID#: | |) | | Amount of Contribution (\$) | \$15.00 | |
| | | Austin, TX 78730 | | | | | |
| | Principal occu Not Employe | pation / Job title (See Instructions) | | Employer (See Instructions Not Employed |) | | |
| | Date 12/19/2023 | Full name of contributor Kleinman, Betsy Contributor address; City; State Dallas, TX 75230 | | | | Amount of Contribution (\$) | \$1,500.00 |
| | Principal occu Not Employe | pation / Job title (See Instructions) d | | Employer (See Instructions Not Employed |) | | |
| | Date 12/01/2023 Linton, Melaney A. Contributor address; City; State; Zip Code Houston, TX 77007 | | | | Amount of Contribution (\$) | \$103.45 | |
| | Principal occu Executive | pation / Job title (See Instructions) | | Employer (See Instructions Planned Parenthood Gu | | Coast | |
| | | | 1 | | | | |

| | MONEI | ARY POLITICAL CO | NIRIBUTION | IS | | SCHEDUL | E A1 |
|---|---|---|----------------------------------|---|-----------------------------|--|-------------|
| | The Instruction Guide explains how to complete this form. | | | | | Total pages Schedule A1: Sch: 3/4 Rpt: 6/12 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Planned Par | enthood Texas Votes PAC | | | | 00070105 | |
| 4 | Date 12/13/2023 | | | 7 | Amount of Contribution (\$) | \$5.00 | |
| | | Farmers Branch, TX 75234 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 | Employer (See Instructions | 5) | | |
| | Fundraiser | | | Planned Parenthood of | Gre | ater Texas | |
| | Date 11/29/2023 | | | | Amount of Contribution (\$) | \$41.67 | |
| | | Austin, TX 78731 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Office Mana | | | Tilcajete Partners, Ltd. | | | |
| | Date Full name of contributor out-of-state PAC (ID#: | | | | Amount of Contribution (\$) | \$500.00 | |
| | | West Lake Hills, TX 78746 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | Retired | | | Retired | | | |
| | Date 11/30/2023 | Full name of contributor Scanlan, John M Contributor address; City; State West Lake Hills, TX 78746 | out-of-state PAC (ID#:; Zip Code | | | Amount of Contribution (\$) | \$500.00 |
| | Principal occu Retired | pation / Job title (See Instructions) | | Employer (See Instructions Retired |) | | |
| | Date 12/16/2023 | Full name of contributor Stopani, Tracy Contributor address; City; State Longview, TX 75602 | out-of-state PAC (ID#:; Zip Code |) | | Amount of Contribution (\$) | \$5.36 |
| | Principal occu Manager | pation / Job title (See Instructions) | | Employer (See Instructions M Roberts Media | 5) | | |
| | | | | | | | |

| 2 FILER NAME Planned Parenthood Texas Votes PAC | SCHEDULE A1 |
|--|--|
| Planned Parenthood Texas Votes PAC 4 Date | Total pages Schedule A1: Sch: 4/4 Rpt: 7/12 |
| 12/07/2023 Wells, Denise 6 Contributor address; City; State; Zip Code Kirkland, WA 98033 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) | Filer ID (Ethics Commission Filers) 00070105 |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) | Amount of Contribution (\$) \$20.00 |
| | |
| | |
| | |

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 Cor Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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
TTHER (output a colorograph and listed above)

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 1/4 Rpt: 8/12 | Planned Parenthood Texas Votes PAC 00070105 |
| 4 Date | 5 Payee name |
| 11/30/2023 | American Airlines |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$279.90 | 4333 Amon Carter Blvd |
| | |
| Expenditure from corporate funds | Fort Worth, TX 76155 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | PAC staff airfare |
| | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| oxportantaro to sorione or o | |
| Date | Payee name |
| 12/05/2023 | Atchley & Associates LLP |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$800.00 | 1005 La Posada Dr |
| | |
| Expenditure from corporate funds | Austin, TX 78752 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | PAC accounting and reporting services |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experialitie to benefit C/Oi | |
| Date | Payee name |
| 12/06/2023 | Atchley & Associates LLP |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,560.00 | 1005 La Posada Dr |
| | |
| Expenditure from corporate funds | Austin, TX 78752 |
| 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. |
| EAFEINDITURE | Check if Austin, TX, officeholder living expense |
| | PAC accounting and reporting services |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| SAPORARIO TO BOTTON O/OI | • |
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| | |

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District

| Candidate/Officeholder/Politica Credit Card Payment | al Committee | Legal Services The Instruction Guide | | | ges/Contract Labor | OTHER (enter a | a category not listed above) |
|--|-------------------|---------------------------------------|------------------|------------|---------------------|----------------------------|------------------------------|
| | | The monaction Galac | - CAPIGITIS III | OW to com | piete tili3 lollii. | 1 | /=:: |
| 1 Total pages Schedule F1: | | | | | | 3 Filer ID | (Ethics Commission Filers) |
| Sch: 2/4 Rpt: 9/12 | Planned Par | enthood Texas Vo | otes PAC | | | 00070105 | |
| 4 Date | 5 Payee name | | | | | | |
| 12/22/2023 | Atchley & As | sociates LLP | | | | | |
| 6 Amount (\$) | 7 Payee addres | s; City; | State; | Zip Cod | Э | | |
| \$1,402.50 | 1005 La Pos | ada Dr | | | | | |
| | | | | | | | |
| Expenditure from corporate funds | Austin, TX 7 | 8752 | | | | | |
| 8 PURPOSE | (a) Category (See | e Categories listed at the to | on of this sched | dule) (I | Description | | |
| OF | Accounting/I | | | | Check if trave | el outside of Texas. Con | nplete Schedule T. |
| EXPENDITURE | | J | | | Check if Austi | in, TX, officeholder livin | g expense |
| | | | | | PAC accour | nting and reporti | ing services |
| | | | | | | | |
| 9 Complete ONLY if direct | Candidate/Offic | eholder name | Of | fice sougl | nt | Office h | eld |
| expenditure to benefit C/O | Н | | | | | | |
| Date | Payee name | | | | | | |
| 12/08/2023 | Campaign V | erify Inc | | | | | |
| | ' <u>"</u> | | Ctoto | Zin Cod | | | |
| Amount (\$) | Payee addres | | State; | Zip Cod | 2 | | |
| \$95.00 | 1215 31st St | NW | | | | | |
| Expenditure from | PO Box 355 | 4 | | | | | |
| corporate funds | Washington, | DC 20007 | | | | | |
| PURPOSE | (a) Category (See | e Categories listed at the to | op of this sched | dule) (I | Description | | |
| OF EXPENDITURE | Fees | | | | Check if trave | el outside of Texas. Con | nplete Schedule T. |
| EXPENDITURE | | | | | ш | in, TX, officeholder livin | g expense |
| | | | | | PAC verifica | ation service | |
| | | | | | | | |
| Complete ONLY if direct | Candidate/Offic | eholder name | Of | fice sougl | nt | Office h | eld |
| expenditure to benefit C/O | Н | | | | | | |
| Date | Payee name | | | | | | |
| 11/30/2023 | Hilton Garde | n Inn Dallas | | | | | |
| Amount (\$) | Payee addres | s; City; | State; | Zip Code | 9 | | |
| \$225.55 | 2325 N Sten | nmons Fwy | | | | | |
| | | | | | | | |
| Expenditure from corporate funds | Dallas, TX 7 | 5207 | | | | | |
| PURPOSE | | | | 1 | Description | | |
| OF | Travel In Dis | e Categories listed at the to | op of this sched | aule) | | el outside of Texas. Con | nplete Schedule T. |
| EXPENDITURE | i i avei iii Dis | outot | | | = | in, TX, officeholder livin | |
| | | | | | PAC staff lo | | |
| | | | | | | | |
| Complete ONLY if direct | Candidate/Office | eholder name | Of | fice sough | | Office h | eld |
| expenditure to benefit C/O | | | J. | 50091 | - | 25011 | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| | |
| 1 Total pages Schedule F1: | |
| Sch: 3/4 Rpt: 10/12 | Planned Parenthood Texas Votes PAC 00070105 |
| 4 Date | 5 Payee name |
| 12/02/2023 | Lyft |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$59.68 | 2855 Mangum Rd Ste B106 |
| | |
| Expenditure from corporate funds | Houston, TX 77092 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Travel In District Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | PAC staff transportation |
| | |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | 1 |
| Date | Payee name |
| 12/04/2023 | Paragon Solutions |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$75.64 | 201 Main St #1150 |
| | |
| Expenditure from corporate funds | Fort Worth, TX 76102 |
| 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 |
| | PAC credit card processing fees |
| Commission ONLY if dispose | Condidate/Office holds |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 12/11/2023 | Planned Parenthood Greater Texas |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$141.59 | 7424 Greenville Ave |
| Expenditure from | |
| corporate funds | Dallas, TX 75231 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | PAC staff time |
| Commission ONUVIVIII | Condidate/Officeholder name |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| | |
| | |

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

| Candidate/Officeholder/Politica Credit Card Payment | I 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: 4/4 Rpt: 11/12 | Planned Parenthood Texas Votes PAC 00070105 |
| 4 Date | 5 Payee name |
| 12/11/2023 | Planned Parenthood Gulf Coast Action Fund |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$174.65 | 4600 Gulf Freeway |
| Evpanditure from | |
| Expenditure from corporate funds | Houston, TX 77023 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Salaries/Wages/Contract Labor |
| | Check if Austin, TX, officeholder living expense PAC staff time |
| | i Ao stair time |
| O Complete ONLY if direct | Candidate/Officeholder name Office acusht |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 11/28/2023 | Sutton Frost Cary LLP |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$333.00 | 200 E Front St Ste 200 |
| | |
| Expenditure from corporate funds | Arlington, TX 76011 |
| PURPOSE | |
| OF | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | PAC audit services |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | - |
| Date | Payee name |
| 12/20/2023 | United States Postal Service |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$230.82 | 475 L'Enfant Plz SW |
| φ230.02 | 473 L Elliant Fiz Sw |
| Expenditure from | |
| corporate funds | Washington, DC 20260 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. |
| - - | Check if Austin, TX, officeholder living expense PAC shipping |
| | FAC Stripping |
| Complete CNII V if alia | Condidate/Officeholder name Office cought |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| , | |
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UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 12/12 Planned Parenthood Texas Votes PAC 00070105 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 12/25/2023 Planned Parenthood Texas Votes Amount (\$) Payee address; City; State; Zip Code \$1,260.31 2708 S Lamar Blvd Ste 200A Expenditure from Austin, TX 78704 corporate funds TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Loan Repayment/Reimbursement **EXPENDITURE** Check if Austin, TX, officeholder living expense Reimburse PAC staff time and expenses Office sought 11 Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH