

# 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</b> Filer ID (Ethics Commission Filers) 00034199	<b>2</b> Total pages filed: 10
<b>3</b> COMMITTEE NAME North Brazoria County Democratic Club		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 01/13/2024	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO BOX 1551  Pearland, TX 77581		
	<b>5</b> CAMPAIGN TREASURER NAME  MS / MRS / MR FIRST MI Mr. Cooper G.  NICKNAME LAST SUFFIX Snapp		
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1107 Gulfon Drive  Pearland, TX 77581		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1107 Gulfon Drive  Pearland, TX 77581		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 303-2667		
<b>9</b> REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input 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</b> PERIOD COVERED	Month Day Year      Month Day Year 07/01/2023      THROUGH      12/31/2023		
<b>11</b> ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

**GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> North Brazoria County Democratic Club	<b>13 Filer ID</b> (Ethics Commission Filers) 00034199
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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> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,620.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 0.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 3,093.98
OUTSTANDING LOAN TOTALS	<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.

Mr. Cooper G. Snapp  
\_\_\_\_\_  
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> North Brazoria County Democratic Club		<b>18 Filer ID</b> (Ethics Commission Filers) 00034199
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,620.00
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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
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	\$ 23.75
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: 1/4 Rpt: 4/10
<b>2</b> FILER NAME North Brazoria County Democratic Club		<b>3</b> Filer ID (Ethics Commission Filers) 00034199
<b>4</b> Date 12/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arline, Vanessa <hr/> <b>6</b> Contributor address; City; State; Zip Code  Pearland, TX 77584	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Asst Professor		<b>9</b> Employer (See Instructions) University of St Thomas
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Arline, Vanessa <hr/> Contributor address; City; State; Zip Code  Pearland, TX 77584	Amount of Contribution (\$)  \$170.00
Principal occupation / Job title (See Instructions) Asst Professor		Employer (See Instructions) University of St Thomas
Date 08/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cox, Lloyd <hr/> Contributor address; City; State; Zip Code  Alvin, TX 77511	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Feules, Scott <hr/> Contributor address; City; State; Zip Code  Pearland, TX 77584	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Feules, Scott <hr/> Contributor address; City; State; Zip Code  Pearland, TX 77584	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/4 Rpt: 5/10
<b>2</b> FILER NAME North Brazoria County Democratic Club		<b>3</b> Filer ID (Ethics Commission Filers) 00034199
<b>4</b> Date 09/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Feules, Scott	<b>7</b> Amount of Contribution (\$) \$5.00
<b>6</b> Contributor address; City; State; Zip Code  Pearland, TX 77584		
<b>8</b> Principal occupation / Job title (See Instructions) Not Employed		<b>9</b> Employer (See Instructions) Not Employed
Date 10/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Feules, Scott	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Pearland, TX 77584		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Feules, Scott	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Pearland, TX 77584		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Feules, Scott	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Pearland, TX 77584		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Feules, Scott	Amount of Contribution (\$) \$85.00
Contributor address; City; State; Zip Code  Pearland, TX 77584		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/4 Rpt: 6/10
<b>2</b> FILER NAME North Brazoria County Democratic Club		<b>3</b> Filer ID (Ethics Commission Filers) 00034199
<b>4</b> Date 10/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Green, Al <hr/> <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77054	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Congress		<b>9</b> Employer (See Instructions) United States
Date 07/23/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Henry, John <hr/> Contributor address; City; State; Zip Code  Angleton, TX 77515	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Brazosport College
Date 08/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mondragon, Ramiro <hr/> Contributor address; City; State; Zip Code  Alvin, TX 77511	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Electrician		Employer (See Instructions) N/A
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perry, Edward <hr/> Contributor address; City; State; Zip Code  Manvel, TX 77587	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Outreach Coordinator		Employer (See Instructions) Dept of Veterans Affairs
Date 08/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phelps, William <hr/> Contributor address; City; State; Zip Code  Rosharon, TX 77583	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Fort Bend

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/4 Rpt: 7/10
<b>2</b> FILER NAME North Brazoria County Democratic Club		<b>3</b> Filer ID (Ethics Commission Filers) 00034199
<b>4</b> Date 09/18/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phelps, William	<b>7</b> Amount of Contribution (\$) \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Rosharon, TX 77583		
<b>8</b> Principal occupation / Job title (See Instructions) Education		<b>9</b> Employer (See Instructions) Fort Bend
Date 10/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phelps, William	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Rosharon, TX 77583		
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) Fort Bend
Date 10/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Snapp, Cooper	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code  Pearland, TX 77581		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) NASA

# 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: 1/3 Rpt: 8/10	<b>2</b> FILER NAME North Brazoria County Democratic Club	<b>3</b> Filer ID (Ethics Commission Filers) 00034199
<b>4</b> Date 07/23/2023	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) 1.19 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) Donation Fee
Date 08/13/2023	Payee name ActBlue	
Amount (\$) 0.99 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) Donation Fee
Date 08/20/2023	Payee name ActBlue	
Amount (\$) 1.19 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) Donation Fee
Date 09/17/2023	Payee name ActBlue	
Amount (\$) 0.99 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) Donation Fee

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/3 Rpt: 9/10		2 FILER NAME North Brazoria County Democratic Club		3 Filer ID (Ethics Commission Filers) 00034199	
4 Date 09/24/2023		5 Payee name ActBlue			
6 Amount (\$)  1.19 <input type="checkbox"/> Expenditure from corporate funds		7 Payee Address; City; State; Zip 366 Summer Street  Somerville, MA 02144-3132			
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) Donation Fee	
Date 10/15/2023		Payee name ActBlue			
Amount (\$)  0.40 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 366 Summer Street  Somerville, MA 02144-3132			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) Donation Fee	
Date 10/22/2023		Payee name ActBlue			
Amount (\$)  4.94 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 366 Summer Street  Somerville, MA 02144-3132			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) Donation Fee	
Date 11/12/2023		Payee name ActBlue			
Amount (\$)  0.40 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 366 Summer Street  Somerville, MA 02144-3132			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) Donation Fee	

# 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 North Brazoria County Democratic Club	3 Filer ID (Ethics Commission Filers) 00034199
4 Date 12/17/2023	5 Payee name ActBlue	
6 Amount (\$)  0.40 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 366 Summer Street  Somerville, MA 02144-3132	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation Fee
Date 12/31/2023	Payee name ActBlue	
Amount (\$)  12.06 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street  Somerville, MA 02144-3132	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation Fee