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) 00086592 3 COMMITTEE NAME **OFFICE USE ONLY Bexar County Young Democrats** Date Received **ELECTRONICALLY FILED** 01/16/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 830651 Date Hand-delivered or Date Postmarked Change of Address San Antonio, TX 78283 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Antonio R. NAME NICKNAME LAST **SUFFIX** Infante STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 7230 Wurzbach Rd. Apt. 1801 STREET **ADDRESS** (Residence or Business) San Antonio, TX 78240 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1935 W. Ashby Pl. MAILING **ADDRESS** San Antonio, TX 78201 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 845-2415 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2023 12/31/2023 11 ELECTION **ELECTION DATE ELECTION TYPE** X Other Month Day Year Primary Runoff 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) |
|---|--|--|-----------------|----------------------------|
| Bexar County Young | Democrats | | 00086592 | |
| 14 COMMITTEE ACTIVITY | Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | | |
| (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 | | |
| | | . орровия ———————————————————————————————————— | | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | |
| 15 CONTRIBUTION TOTALS | PLEDGES, LOANS, CONTRIBUTIONS Not the check here if this report | D 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 | AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 1,995.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZE | D POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICA | L EXPENDITURES | \$ | 1,059.51 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL OF THE REPORTIN | CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD | DAY \$ | 2,048.21 |
| OUTSTANDING LOAN TOTALS | | AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD | HE \$ | 0.00 |
| 16 AFFIDAVIT | | | • | |
| | | I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code. | | |
| | | Mr. Antonic | R. Infante | |
| | | Signature of Car | npaign Treasure | er |
| AFFIX NOTA | RY STAMP / SEAL ABOVE | | | |
| | | , th | is 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 office | er administering oath |
| Signature of officer | administering ball | Thinked hame of onicer administrating batti | THE OF UTILLE | administering batti |

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

3 of 13

| | 3 of 13 |
|------------|-------------------|
| (Ethics Co | ommission Filers) |
| 92 | |
| SUB | BTOTAL AMOUNT |
| \$ | 1,995.00 |
| \$ | 0.00 |
| \$ | 0.00 |
| \$ | |
| \$ | |
| \$ | |
| \$ | |
| ON \$ | |
| \$ | 0.00 |
| \$ | 1,059.51 |
| \$ | 0.00 |
| \$ | 0.00 |
| \$ | 0.00 |
| \$ | |
| \$ | 4.06 |
| | \$ |

| | MONET | ARY POLITICAL CONTRIBUT | TION | IS | | SCHEDUL | E A1 |
|---|------------------------------|---|--------|---|---------|--|-------------|
| | The Instruc | ction Guide explains how to complete th | is for | m. | 1 | Total pages Schedule A1: Sch: 1/3 Rpt: 4/13 | |
| 2 | FILER NAME Bexar Count | / Young Democrats | | | 3 | Filer ID (Ethics Commission 00086592 | n Filers) |
| 4 | Date 11/30/2023 | Full name of contributor | |) | 7 | Amount of Contribution (\$) | \$200.00 |
| 0 | Dringing Loon | San Antonio, TX 78251 | ام | Employer (Coa Instruction | <u></u> | | |
| 8 | Candidate | pation / Job title (See Instructions) | 9 | Employer (See Instructions Consultant | s) | | |
| | Date 12/02/2023 | Full name of contributor out-of-state PAC (I Alvarez, Mary Lou (Judge) Contributor address; City; State; Zip Code | D#: | | • | Amount of Contribution (\$) | \$135.00 |
| | Principal occur | San Antonio, TX 78212 pation / Job title (See Instructions) | | Employer (See Instructions | ;) | | |
| | judge | oation / Job title (See Instructions) | | Texas/Bexar County | ·) | | |
| | Date 11/29/2023 | Full name of contributor out-of-state PAC (I Carranza, Kristian Contributor address; City; State; Zip Code | D#: |) | | Amount of Contribution (\$) | \$125.00 |
| | | San Antonio, TX 78221 | _ | | | | |
| | Principal occu Candidate | pation / Job title (See Instructions) | | Employer (See Instructions Kristian Carranza for Te | | 5 | |
| | Date 12/01/2023 | Full name of contributor out-of-state PAC (I Clay-Flores, Rebeca Contributor address; City; State; Zip Code San Antonio, TX 78214 | |) | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu County Com | oation / Job title (See Instructions) missioner | | Employer (See Instructions bexar | 5) | | |
| | Date 08/10/2023 | Full name of contributor out-of-state PAC (I Coronado, Lauren Contributor address; City; State; Zip Code San Antonio, TX 78209 | D#: | | | Amount of Contribution (\$) | \$50.00 |
| | | oation / Job title (See Instructions) ects AdministratorStrategic Initiatives | | Employer (See Instructions VIA Metro | 5) | | |
| | | | | | | | |

| | MONEI | ARY POLITICAL (| CONTRIBUTION | NS | | SCHEDUL | E A1 |
|--|-------------------------------|---|---|----------------------------------|----------|--|-------------|
| | The Instru | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 2/3 Rpt: 5/13 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | Bexar Count | y Young Democrats | | | | 00086592 | |
| 4 | Date 12/10/2023 | 5 Full name of contributor Fuentes, Charles6 Contributor address; City; St | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$10.00 |
| 8 | Principal occu | San Antonio, TX 78222 pation / Job title (See Instructions | s) 9 | Employer (See Instructions | | | |
| ľ | Legislative D | | 9 | Communications Worke | | of America | |
| | Legisialive L | | | Communications worke | :15 | | |
| | Date 12/09/2023 | Full name of contributor Gonzalez, Amanda Contributor address; City; St | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$75.00 |
| | | San Antonio, TX 78224 | | | | | |
| | Principal occu | pation / Job title (See Instructions | 3) | Employer (See Instructions | s) | | |
| | Executive Di | rector | | Blue Cares | | | |
| | Date 12/02/2023 | Full name of contributor Merhi, Hatem Contributor address; City; St | out-of-state PAC (ID#: ate; Zip Code |) | | Amount of Contribution (\$) | \$125.00 |
| | | San Antonio, TX 78248 | | | | | |
| | Principal occu | pation / Job title (See Instructions | 3) | Employer (See Instructions | 5) | | |
| | Business Ov | vner | | Big Ben MIT | | | |
| | Date 12/10/2023 | Full name of contributor Salazar, Javier Contributor address; City; St | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Sheriff | pation / Job title (See Instructions | s) | Employer (See Instructions Bexar | 5) | | |
| Date Full name of contributor out-of-state PAC (ID#: | |) | - | Amount of Contribution (\$) | \$200.00 | | |
| | | San Antonio, TX 78249 | | | | | |
| | Principal occu Scrum Maste | pation / Job title (See Instructions | s) | Employer (See Instructions USAA | 5) | | |
| | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | | SCHEDUL | E A1 | |
|--|--|--|---|-----------------------------|--|-----------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 3/3 Rpt: 6/13 | |
| 2 | FILER NAME Bexar Count | y Young Democrats | | 3 | Filer ID (Ethics Commission 00086592 | n Filers) |
| 4 | Date 12/10/2023 | Full name of contributor |) | 7 | Amount of Contribution (\$) | \$75.00 |
| _ | | San Antonio, TX 78212 | | _ | | |
| 8 | Principal occu Judge | pation / Job title (See Instructions) | 9 Employer (See Instructions) State of Texas Fourth C | | t of Appeals | |
| Date Full name of contributor out-of-state PAC (ID#: | | | | Amount of Contribution (\$) | \$200.00 | |
| | Principal occu | Houston, TX 77002 pation / Job title (See Instructions) | Employer (See Instructions |) 5) | | |
| | Director Harris County | | | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 11/29/2023 ramirez, Ana Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$200.00 | |
| | | San Antonio, TX 78229 | | | | |
| | | pation / Job title (See Instructions) Counselor at Law | Employer (See Instructions self | 5) | | |
| | Date 11/30/2023 | Full name of contributor out-of-state PAC (ID#:_villaseñor-hernandez, Dannick Contributor address; City; State; Zip Code San Antonio, TX 78261 | | | Amount of Contribution (\$) | \$200.00 |
| | Principal occu Attorney | pation / Job title (See Instructions) | Employer (See Instructions Espinoza & Brock PLLC | | | |
| | | | | | | |

| PLEI | DGED CONTRIBU | TIONS | | | | SCHEDULE B |
|----------------------|--------------------------------------|----------------------|----------------------|-------------------------|-------------------------------------|--|
| Т | he Instruction Guide exp | plains how to compl | ete this form. | 1 | Total pages Sche Sch: 1/1 Rpt: 7 | |
| 2 FILER N Bexar C | IAME County Young Democrats | 3 | | hics Commission Filers) | | |
| 4 TOTAL | OF UNITEMIZED PLEDO | GES | | | \$ | 0.00 |
| 5 Date | 6 Full name of pledgor | out-of-state PAC (ID | | 8 | Amount of pledge (\$) | 9 In-kind description (If applicable) |
| | 7 Pledgor Address; | City; State; Zip Cod | e | | _ | |
| | | | 1 | | | side of Texas. Complete Schedule T. |
| 10 Principa | l occupation / Job title (See Instru | uctions) | 11 Employer (See Ins | structi | ons) | |
| | | | | | | |
| | | | | | | |

| | LOANS | | | | | SCHEDULE E |
|----|------------------------------------|--|-----------------|------------------------|-------------------|---|
| | The Instructio | The Instruction Guide explains how to complete this form. 1 Total page Sch: 1/1 | | | | |
| 2 | FILER NAME Bexar County Yo | oung Democrats | | | 3 Filer II 0008 | D (Ethics Commission Filers) 6592 |
| 4 | TOTAL OF UN | IITEMIZED LOANS | | | <u> </u> | \$ 0.00 |
| 5 | Date of loan | 7 Name of lender | out-of-state PA | 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 occupation | on / Job title (See Instructions) | | 13 Employer (See Ins | tructions) | |
| 14 | Description of Coll | ateral | | 15 Check if personal f | unds were deposit | ed into political account (See Instructions) |
| 16 | GUARANTOR INFORMATION | 17 Name of guarantor | | | | 19 Amount Guaranteed (\$) |
| | not applicable | 18 Guarantor address; City; | State; | Zip Code | | |
| | | | | | | |
| 20 | Principal occupation | on | | 21 Employer (See Ins | tructions) | |
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POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage 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 in District

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|---|
| 1 Total pages Cabadula F1: | 2 Files ID (Ethics Commission Files) |
| 1 Total pages Schedule F1: Sch: 1/3 Rpt: 9/13 | 2 FILER NAME Bexar County Young Democrats 3 Filer ID (Ethics Commission Filers) 00086592 |
| 4 Date | 5 Payee name |
| 12/11/2023 | Al Carbon Pollos |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$466.40 | 547 CULEBRA RD |
| | |
| Expenditure from | Can Antonia TV 70010 |
| corporate funds | San Antonio, TX 78210 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EVENDITUE | Food/Beverage Expense |
| EXPENDITURE | Check if Austin, TX, officeholder living expense |
| | Xmas party- meeting |
| | |
| Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| 07/12/2023 | CHICKEN N PICKL |
| | |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$35.74 | 5215 UTSA BLVD |
| | |
| Expenditure from corporate funds | San Antonio, TX 78249 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Food/Beverage Expense |
| EXPENDITORE | Check if Austin, TX, officeholder living expense |
| | Food for event |
| | |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 07/31/2023 | Jimmy Johns |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$96.59 | 1700 N. Main Ave |
| \$90.59 | 1700 N. Walli Ave |
| Expenditure from corporate funds | San Antonio, TX 78212 |
| • | In. |
| 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 | 1 ood/beverage Expense |
| | Check if Austin, TX, officeholder living expense Food for meeting |
| | Food for ineeding |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| | |
| | |
| | |

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 Coi

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

| 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: 2/3 Rpt: 10/13 | Bexar County Young Democrats 00086592 |
| 4 Date | 5 Payee name |
| 12/11/2023 | Pasha Medi |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$107.12 | 9339 Wurzbach Rd |
| | |
| Expenditure from corporate funds | San Antonio, TX 78240 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense meeting- |
| | The curry |
| O Complete ONLY if direct | Candidate/Officeholder name Office sought |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| , | |
| Date | Payee name |
| 08/24/2023 | The Friendly Spot |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$223.66 | 943 S. Alamo |
| | |
| Expenditure from corporate funds | San Antonio, TX 78205 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | Meet the candidate - Roland G. |
| 2 1 2 2 1 1 2 1 | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| | |
| Date | Payee name |
| 07/20/2023 | USPS |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$65.00 | PO BOXES O 475 L'ENFANT PLAZA |
| | |
| Expenditure from corporate funds | Washington, DC 20024 |
| PURPOSE | |
| OF | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Mail box rental |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| | |
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POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

| Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politici Credit Card Payment | Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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: | |
| Sch: 3/3 Rpt: 11/13 | Bexar County Young Democrats 00086592 |
| 4 Date | 5 Payee name |
| 10/17/2023 | USPS |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$65.00 | PO BOXES O 475 L'ENFANT PLAZA |
| Expenditure from corporate funds | Washington, DC 20024 |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense mail |
| Complete ONLY if direct expenditure to benefit C/O | Candidate/Officeholder name Office sought Office held |
| | |

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

SCHEDULE K

| | The Instruction Guide explains how to complete this form. | | | | | | ges Schedule K: 2 Rpt: 12/13 | | |
|----------|---|----------|---|-------------|-------|----------|---------------------------------|--------------------------|--------|
| 2 | FILER NAME | | | : | 3 | Filer | ID | (Ethics Commission F | ilers) |
| l | Bexar Count | ty Y | oung Democrats | | | 0008 | 865 | 92 | |
| 4 | Date 07/31/2023 | | | | | | 3 Amount (\$) | \$0.05 | |
| | | | Live Oak, TX 78233 | | | | | | |
| | | 7 | Purpose for which amount is received | neck if po | litic | al co | ntrib | oution returned to filer | |
| Г | Date | | Name of person from whom amount is received | | | | Т | Amount (\$) | |
| l | 08/31/2023 | | RBFCU | | | | | | \$0.04 |
| l | | ļ | Address of person from whom amount is received; City; State; Zip Code | | | | | | |
| l | | | | | | | | | |
| l | | | | | | | | | |
| l | | | Live Oak, TX 78233 | | | | | | |
| l | | H | Purpose for which amount is received | neck if po | litic | al co | ntrib | oution returned to filer | |
| l | | | dividen | • | | | | | |
| ⊨ | Date | H | Name of parson from whom amount is received | | | | T | Amount (\$) | |
| l | 09/30/2023 | | Name of person from whom amount is received RBFCU | | | | | Amount (\$) | \$0.03 |
| l | 03/30/2023 | ļ | | | | | | | Ψ0.03 |
| l | | | Address of person from whom amount is received; City; State; Zip Code | | | | | | |
| l | | | | | | | | | |
| | | | Live Oak, TX 78233 | | | | | | |
| l | | ┝ | | ock if no | litic | al co | atrib | oution returned to filer | |
| l | | | dividen | ieck ii po | IILIC | ai cui | ILIIL | dulon returned to mer | |
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| l | Date | | Name of person from whom amount is received | | | | | Amount (\$) | |
| l | 10/31/2023 | ļ | RBFCU | | | | | | \$0.03 |
| l | | | Address of person from whom amount is received; City; State; Zip Code | | | | | | |
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| l | | H | | eck if no | litic | al co | <u> </u> | oution returned to filer | |
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| l | ,, | ļ | Address of person from whom amount is received; City; State; Zip Code | | | | | | 40.00 |
| | | | Address of person from whom amount is received. City, State, Zip Code | | | | | | |
| | | | Live Cole TV 79222 | | | | | | |
| | | \vdash | Live Oak, TX 78233 | | | | | | |
| | | | | eck if po | litic | al co | ntrib | oution returned to filer | |
| dividend | | | | | | | | | |
| | | | | | | | | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 13/13 2 FILER NAME Filer ID (Ethics Commission Filers) **Bexar County Young Democrats** 00086592 8 Amount (\$) Date 5 Name of person from whom amount is received 12/31/2023 **RBFCU** \$0.02 6 Address of person from whom amount is received; City; State; Zip Code Live Oak, TX 78233 Purpose for which amount is received ☐ Check if political contribution returned to filer dividend Amount (\$) Date Name of person from whom amount is received 08/03/2023 **RBFCU** \$3.86 Address of person from whom amount is received; City; State; Zip Code Live Oak, TX 78233 Purpose for which amount is received Check if political contribution returned to filer Easy savings rebate