

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) 00082403	2 Total pages filed: 20
3 COMMITTEE NAME The Black Women's PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/16/2024	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 122072 Arlington, TX 76012		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Jean NICKNAME LAST SUFFIX Coleman		
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 6912 River Park Lane N. #412 Fort Worth, TX 76116		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 6912 River Park Lane N. #412 Fort Worth, TX 76116		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (682) 330-2092		
9 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		
10 PERIOD COVERED	Month Day Year Month Day Year 07/01/2023 THROUGH 12/31/2023		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <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

12 COMMITTEE NAME The Black Women's PAC	13 Filer ID (Ethics Commission Filers) 00082403
---------------------------------------------------	-----------------------------------------------------------

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 Sheila Jackson Lee Mayor, City of Houston
		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)	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12,498.20
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 8,414.61
	4. TOTAL POLITICAL EXPENDITURES	\$ 8,414.61
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 8,015.51
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 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.

Ms. Jean Coleman

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

Page 3 of 20

12 COMMITTEE NAME The Black Women's PAC		13 Filer ID (Ethics Commission Filers) 00082403
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 Shannan Nobles Controller, City of Houston 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.)	
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Coryat Marina City Council, City of Houston 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.)	
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.)	
	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.)	Leticia Plummer City Council, City of Houston

SUBTOTALS - GPAC

17 COMMITTEE NAME The Black Women's PAC		18 Filer ID (Ethics Commission Filers) 00082403
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 12,498.20
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 8,414.61
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/15 Rpt: 5/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 07/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Victoria A <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76109	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) none		9 Employer (See Instructions) none
Date 08/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Victoria A <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none
Date 09/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Victoria A <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none
Date 10/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Victoria A <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none
Date 11/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Victoria A <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76109	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/15 Rpt: 6/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 12/04/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Victoria A <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76109	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) none		9 Employer (See Instructions) none
Date 07/17/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Akilah Bacy for Texas <hr/> Contributor address; City; State; Zip Code Houston, TX 77248	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) 		Employer (See Instructions) None
Date 07/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bess, Danielle Keys <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Womack Development
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castex Tatum, Martha <hr/> Contributor address; City; State; Zip Code Houston, TX 77035	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Council Member		Employer (See Instructions) City of Houston
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cloud, Carvana <hr/> Contributor address; City; State; Zip Code Houston, TX 77019	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/15 Rpt: 7/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 07/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cynthia Ginyard for County Chair <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77488	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) 		9 Employer (See Instructions) None
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Echevarria, Tiffany <hr/> Contributor address; City; State; Zip Code Houston, TX 77020	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Non-profit		Employer (See Instructions) Collective Action for Youth
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engelhart, Michael <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Diane <hr/> Contributor address; City; State; Zip Code Austin, TX 78725	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self employed
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Diane <hr/> Contributor address; City; State; Zip Code Austin, TX 78725	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/15 Rpt: 8/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 09/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Diane <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78725	7 Amount of Contribution (\$) \$21.00
8 Principal occupation / Job title (See Instructions) Therapist		9 Employer (See Instructions) Self employed
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Diane <hr/> Contributor address; City; State; Zip Code Austin, TX 78725	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self employed
Date 11/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Diane <hr/> Contributor address; City; State; Zip Code Austin, TX 78725	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self employed
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greene, Diane <hr/> Contributor address; City; State; Zip Code Austin, TX 78725	Amount of Contribution (\$) \$21.00
Principal occupation / Job title (See Instructions) Therapist		Employer (See Instructions) Self employed
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Unites <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$7,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions) None

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/15 Rpt: 9/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 07/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Igwe, Eric <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76137	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) F-35 FoM Block 4 Project Manager		9 Employer (See Instructions) Lockheed Martin
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Igwe, Eric <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) F-35 FoM Block 4 Project Manager		Employer (See Instructions) Lockheed Martin
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Igwe, Eric <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) F-35 FoM Block 4 Project Manager		Employer (See Instructions) Lockheed Martin
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Igwe, Eric <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) F-35 FoM Block 4 Project Manager		Employer (See Instructions) Lockheed Martin
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Igwe, Eric <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76137	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) F-35 FoM Block 4 Project Manager		Employer (See Instructions) Lockheed Martin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/15 Rpt: 10/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 12/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Igwe, Eric	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76137	
8 Principal occupation / Job title (See Instructions) F-35 FoM Block 4 Project Manager		9 Employer (See Instructions) Lockheed Martin
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Tarsha	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Houston, TX 77073	
Principal occupation / Job title (See Instructions) Organizer		Employer (See Instructions) Texas organizing project
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masco, Raquel	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Bryan, TX 77807	
Principal occupation / Job title (See Instructions) Nonprofit Management		Employer (See Instructions) Brazos Valley Center got Independent Living
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masco, Raquel	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Bryan, TX 77807	
Principal occupation / Job title (See Instructions) Nonprofit Management		Employer (See Instructions) Brazos Valley Center got Independent Living
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masco, Raquel	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Bryan, TX 77807	
Principal occupation / Job title (See Instructions) Nonprofit Management		Employer (See Instructions) Brazos Valley Center got Independent Living

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/15 Rpt: 11/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 07/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nobles, Shannan	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Houston, TX 77026	
8 Principal occupation / Job title (See Instructions) Chief Deputy City Controller		9 Employer (See Instructions) City of Houston
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nwabara, Obes	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77056	
Principal occupation / Job title (See Instructions) Data Analytics Specialist		Employer (See Instructions) Enbridge
Date 07/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Angela	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Dallas, TX 75243	
Principal occupation / Job title (See Instructions) Educational Diagnostician		Employer (See Instructions) Irving ISD
Date 08/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Angela	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Dallas, TX 75243	
Principal occupation / Job title (See Instructions) Educational Diagnostician		Employer (See Instructions) Irving ISD
Date 09/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Angela	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Dallas, TX 75243	
Principal occupation / Job title (See Instructions) Educational Diagnostician		Employer (See Instructions) Irving ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/15 Rpt: 12/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 10/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Angela <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75243	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Educational Diagnostician		9 Employer (See Instructions) Irving ISD
Date 11/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Angela <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educational Diagnostician		Employer (See Instructions) Irving ISD
Date 12/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orr, Angela <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Educational Diagnostician		Employer (See Instructions) Irving ISD
Date 07/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rakirez, Erika <hr/> Contributor address; City; State; Zip Code Houston, TX 77008	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Harris County
Date 07/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Vera <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76119	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/15 Rpt: 13/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 08/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Vera <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76119	7 Amount of Contribution (\$) \$20.20
8 Principal occupation / Job title (See Instructions) none		9 Employer (See Instructions) none
Date 09/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Vera <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76119	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none
Date 10/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Vera <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76119	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Vera <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76119	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none
Date 12/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Vera <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76119	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) none		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/15 Rpt: 14/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 07/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Cora <hr/> 6 Contributor address; City; State; Zip Code PEARLAND, TX 77584	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Realtor		9 Employer (See Instructions) George E Johnson Properties
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Cora <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Real Estate Consultant		Employer (See Instructions) George E Johnson Properties
Date 08/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Cheryl <hr/> Contributor address; City; State; Zip Code Fort WOrth, TX 76112	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) ILTEXAS
Date 09/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Cheryl <hr/> Contributor address; City; State; Zip Code Fort WOrth, TX 76112	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) ILTEXAS
Date 10/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Cheryl <hr/> Contributor address; City; State; Zip Code Fort WOrth, TX 76112	Amount of Contribution (\$) \$20.20
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) ILTEXAS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/15 Rpt: 15/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 11/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Cheryl	7 Amount of Contribution (\$) \$20.20
6 Contributor address; City; State; Zip Code Fort Worth, TX 76112		
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) ILTEXAS
Date 12/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Cheryl	Amount of Contribution (\$) \$20.20
Contributor address; City; State; Zip Code Fort Worth, TX 76112		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) ILTEXAS
Date 07/12/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Tracy	Amount of Contribution (\$) \$320.00
Contributor address; City; State; Zip Code Arlington, TX 76012		
Principal occupation / Job title (See Instructions) Administrative		Employer (See Instructions) City of Fort Worth
Date 09/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sereal, Ursula	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Manvel, TX 77578		
Principal occupation / Job title (See Instructions) Payroll Consultant		Employer (See Instructions) Self-Employed
Date 10/01/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sereal, Ursula	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Manvel, TX 77578		
Principal occupation / Job title (See Instructions) Payroll Consultant		Employer (See Instructions) Self-Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/15 Rpt: 16/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 07/11/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teare, Sean	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Houston, TX 77266	
8 Principal occupation / Job title (See Instructions) Candidate		9 Employer (See Instructions) Sean Teare for Harris County District Attorney
Date 07/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urbin, Salustra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Brentwood, CA 94513	
Principal occupation / Job title (See Instructions) biomedical Scientist		Employer (See Instructions) lawrence livermore lab
Date 08/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urbin, Salustra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Brentwood, CA 94513	
Principal occupation / Job title (See Instructions) biomedical Scientist		Employer (See Instructions) lawrence livermore lab
Date 09/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urbin, Salustra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Brentwood, CA 94513	
Principal occupation / Job title (See Instructions) biomedical Scientist		Employer (See Instructions) lawrence livermore lab
Date 10/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urbin, Salustra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Brentwood, CA 94513	
Principal occupation / Job title (See Instructions) biomedical Scientist		Employer (See Instructions) lawrence livermore lab

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/15 Rpt: 17/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 11/21/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urbin, Salustra	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Brentwood, CA 94513	
8 Principal occupation / Job title (See Instructions) biomedical Scientist		9 Employer (See Instructions) lawrence livermore lab
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Urbin, Salustra	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Brentwood, CA 94513	
Principal occupation / Job title (See Instructions) biomedical Scientist		Employer (See Instructions) lawrence livermore lab
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Nancy	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75025	
Principal occupation / Job title (See Instructions) Sr. IT Project Manager		Employer (See Instructions) Omnicom Group Inc
Date 11/03/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Howard	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Long Beach, CA 90815	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 11/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Howard	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Long Beach, CA 90815	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/15 Rpt: 18/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 07/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Caroline	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Houston, TX 77009		
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Schlumberger
Date 08/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Caroline	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77009		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Schlumberger
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Caroline	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77009		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Schlumberger
Date 10/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Caroline	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77009		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Schlumberger
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Caroline	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Houston, TX 77009		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Schlumberger

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/15 Rpt: 19/20
2 FILER NAME The Black Women's PAC		3 Filer ID (Ethics Commission Filers) 00082403
4 Date 12/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkinson, Caroline <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Schlumberger

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 20/20

2 FILER NAME
The Black Women's PAC

3 Filer ID (Ethics Commission Filers)
00082403

4 TOTAL OF UNITEMIZED PLEDGES

\$ 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 Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)