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) 00070512 3 COMMITTEE NAME **OFFICE USE ONLY** Democratic Non-Urban Caucus Date Received **ELECTRONICALLY FILED** 07/01/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 5656 N. Central Expressway, Unit 302 Date Hand-delivered or Date Postmarked Change of Address Dallas, TX 75206 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Judy L. NAME NICKNAME LAST **SUFFIX** Baker STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1500 E Marshall Ave STREET **ADDRESS** Apt 30 (Residence or Business) Longview, TX 75601 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1500E Marshall Ave MAILING **ADDRESS** Apt 30 Longview, TX 75601 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (575) 640-7942 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Democratic Non-Urban	Caucus			00070512	2
4 COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)	7. Cupported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION			RIBUTIONS (OTHER THAN	<u> </u>	
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M Check here if this report	OR GUARANTEES MADE ELECTRONIC	OF LOANS, OR CALLY)	\$	0.00
	2. TOTAL POLITICA	L CONTRIBUTIO	NS	\$	4 454 60
	(OTHER THAN PLE	DGES, LOANS, OR	GUARANTEES OF LOANS)		1,451.63
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPE	NDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURE	ES	\$	1,396.88
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING		MAINTAINED AS OF THE LAST	DAY \$	3,985.25
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE I		OUTSTANDING LOANS AS OF	THE \$	0.00
6 AFFIDAVIT					
6 / W 15/ W		true a	ar, or affirm, under penalty of pe and correct and includes all infor r Title 15, Election Code.		
				y L. Baker	liror
			Signature of Ca	ınpaigii ireas	uici
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	before me, by the said		, t	his the	day
of					
Signature of officer add	ministering oath	Printed name of offi	icer administering oath	Title of off	icer administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			3 of 29							
17 COMMITT	EE NAME tic Non-Urban Caucus	18 Filer ID 00070512	(Ethics Commission Filers)							
		00070512								
l	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT							
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,451.0							
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$							
3.	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 CORPORAL LABOR ORGANIZATION	ATION OR	\$							
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$							
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$							
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$							
9.	SCHEDULE E: LOANS		\$							
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 1,396.							
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$							
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	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	\$							

	MONET	ARY POLITICAL CONTRI	BUTION	IS		SCHEDULE	A1
	The Instruc	ction Guide explains how to comple	ete this for	n.	1	Total pages Schedule A1: Sch: 1/17 Rpt: 4/29	
2	FILER NAME Democratic	Non-Urban Caucus			3	Filer ID (Ethics Commission 00070512	Filers)
4	Date 01/04/2024	Adams, John (Mr.)	e PAC (ID#:		7	Amount of Contribution (\$)	\$5.00
_	5	Huntsville, TX 77331	- la	5 1 (0 1 1 1	<u></u>		
8	none	pation / Job title (See Instructions)	9	Employer (See Instructions none	5)		
	Date 01/31/2024	Adams, John (Mr.))		Amount of Contribution (\$)	\$5.00
	Principal occu	Huntsville, TX 77331 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	none	pation / oob tale (See Holadalons)		none	,,		
	Date 02/29/2024	Full name of contributor	e PAC (ID#:)		Amount of Contribution (\$)	\$5.00
		Huntsville, TX 77331					
	Principal occu none	pation / Job title (See Instructions)		Employer (See Instructions none	5)		
03/31/2024 Adams, John (Mr.)		Adams, John (Mr.))	•	Amount of Contribution (\$)	\$5.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions none	<u> </u>		
	Date 04/30/2024	Adams, John (Mr.)				Amount of Contribution (\$)	\$5.00
	Principal occu none	pation / Job title (See Instructions)		Employer (See Instructions none	5)		
			,				

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDULE	■ A1
	The Instru	ction Guide explains how to con	mplete this forr	n.	1	Total pages Schedule A1: Sch: 2/17 Rpt: 5/29	
2	FILER NAME Democratic I	Non-Urban Caucus			3	Filer ID (Ethics Commission 00070512	Filers)
4	Date 05/31/2024	Adams, John (Mr.)	f-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5.00
_	<u> </u>	Huntsville, TX 77331	- Ia	5 1 (0 1 : 1			
8	none	pation / Job title (See Instructions)	9	Employer (See Instructions none	i) 		
	Date 04/24/2024	Full name of contributor)		Amount of Contribution (\$)	\$35.63
	Principal occu	Longview, TX 75601 pation / Job title (See Instructions)		Employer (See Instructions	<u></u>		
	retired	panon, ross and (eco menassione)		none	,		
	Date 05/04/2024	Full name of contributor	f-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
		Lubbock, TX 79413					
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions none	()		
Date Full name of contributor 06/07/2024 Bowers , Donita (Ms.) Contributor address; City;		Bowers , Donita (Ms.) Contributor address; City; State; Zip C	f-state PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu	Cleburne, TX 76033 pation / Job title (See Instructions)		Employer (See Instructions retired	j)		
	Date 05/07/2024	Full name of contributor out-or out-o	f-state PAC (ID#:)		Amount of Contribution (\$)	\$40.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions Texas Democratic Party			
			l .				

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 3/17 Rpt: 6/29	
2	FILER NAME Democratic I	Non-Urban Caucus				3	Filer ID (Ethics Commission 00070512	Filers)
4	Date 05/07/2024	Full name of contributor Brannon, Vali (Mrs.) Contributor address; City; States	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$60.00
		Sulphur Springs, TX 7548	2					
8	Principal occu none	pation / Job title (See Instructions	(9)	9	Employer (See Instructions none	s)		
	Date 06/07/2024	Full name of contributor Brown, Robert (Mr.) Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
	Duinning Langu	Terrell, TX 75160	<u>, </u>		Franks or (Cook both sticks			
	Rancher	pation / Job title (See Instructions	5)		Employer (See Instructions self	5)		
	Date 06/07/2024	Full name of contributor Burns, Pat (Mr.) Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00
		Bellville, TX 77418						
	Principal occu retailer	pation / Job title (See Instructions	5)		Employer (See Instructions self	s)		
	Date 05/04/2024	Full name of contributor Campbell, Darrell (Mr.) Contributor address; City; S Yantis, TX 75497					Amount of Contribution (\$)	\$20.00
	Principal occu none	pation / Job title (See Instructions	5)		Employer (See Instructions none	5)		
	Date 05/04/2024	Full name of contributor Criss, Susan (Ms.) Contributor address; City; Si Salado, TX 76548	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$20.00
	Principal occu Lawyer	pation / Job title (See Instructions	s)		Employer (See Instructions Criss&Rousseau Law F		LLP	
	-		<u> </u>					

	MONET	ARY POLITICAL CONTRIBUT		SCHEDULI	E A1		
	The Instruc	ction Guide explains how to complete th	is for	m.	1	Total pages Schedule A1: Sch: 4/17 Rpt: 7/29	
2	FILER NAME Democratic	Non-Urban Caucus			3	Filer ID (Ethics Commission 00070512	n Filers)
4	Date 05/09/2024	 Full name of contributor out-of-state PAC (I Gilbert, Henry (Hank) (Mr.) Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$20.00
8		Whitehouse, TX 75791 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)		
	Date 05/25/2024	Contributor address; City; State; Zip Code		Self		Amount of Contribution (\$)	\$20.00
	Principal occu	Cedar Park, TX 78613 pation / Job title (See Instructions)		Employer (See Instructions none	<u> </u> s)		
	Date 05/04/2024	Full name of contributor out-of-state PAC (I Golighty, Maxine (Ms.) Contributor address; City; State; Zip Code	D#:			Amount of Contribution (\$)	\$20.00
		Hallsville, TX 75650 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 04/21/2024	Full name of contributor out-of-state PAC (I Hux, Alieca (Mrs.) Contributor address; City; State; Zip Code Sulphur Springs, TX 75482		none		Amount of Contribution (\$)	\$20.00
	Principal occuretired	pation / Job title (See Instructions)		Employer (See Instructions none	<u> </u>		
	Date 06/07/2024	Full name of contributor out-of-state PAC (I Johnson, Eugene (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75207	ID#:)		Amount of Contribution (\$)	\$20.00
	Principal occu Lawyer	pation / Job title (See Instructions)		Employer (See Instructions self	5)		
			•				

	MONEI	ARY POLITICAL C		SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this f	form.	1	Total pages Schedule A1: Sch: 5/17 Rpt: 8/29	
2	FILER NAME Democratic I	Non-Urban Caucus			1	Filer ID (Ethics Commission 00070512	ı Filers)
4	Date 02/07/2024	Full name of contributor Jones, Carl (Mr.) Contributor address; City; St)	7 /	Amount of Contribution (\$)	\$15.00
		Spicewood, TX 78669					
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions none	s)		
	Date 03/05/2024	Full name of contributor Jones, Carl (Mr.) Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$15.00
	Principal occu	Spicewood, TX 78669 pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 04/06/2024	Full name of contributor Jones, Carl (Mr.) Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$15.00
		Spicewood, TX 78669		T =	<u> </u>		
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions none	S)		
	Date 05/06/2024	Full name of contributor Jones, Carl (Mr.) Contributor address; City; St)		Amount of Contribution (\$)	\$15.00
	•	Spicewood, TX 78669 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired Date	Full name of contributor	out-of-state PAC (ID#:	none		Amount of Contribution (\$)	
	06/06/2024	Jones, Carl (Mr.) Contributor address; City; St Spicewood, TX 78669	_				\$16.00
	•	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired			none			

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 6/17 Rpt: 9/29		
2	FILER NAME Democratic	Non-Urban Caucus				3	Filer ID (Ethics Commission 00070512	Filers)	
4	Date 05/04/2024	5 Full name of contributor Kerrigan , Sanders (Mr.)6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$20.00	
		Tyler, TX 75702	<u>,</u>						
8	Principal occu Outreach Te	pation / Job title (See Instructions ch)	9	Employer (See Instructions City of Tyler	5)			
	Date 06/09/2024	Full name of contributor Laurent, Melissa (Ms.) Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	•	Amount of Contribution (\$)	\$20.00	
	Dringing Lagge	Winnsboro, TX 76494	.		Employer (Coo Instruction	<u></u>			
	Veterans Se	pation / Job title (See Instructions rvice Officer)		Employer (See Instructions Camp/Titus Counties	5)			
	Date 03/21/2024	Full name of contributor out-of-state PAC (ID#:) Layton, Shirley (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00			
		Lufkin, TX 75901							
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions retired	5)			
	Date 04/30/2024	Full name of contributor Lee, Raymond (Mr.) Contributor address; City; St League City, TX 77573)		Amount of Contribution (\$)	\$25.00	
	Principal occu none	pation / Job title (See Instructions)		Employer (See Instructions none	5)			
	Date 06/07/2024	Full name of contributor Lloyd, Scott (Mr.) Contributor address; City; St Lockhart, TX 78644	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$20.00	
	Principal occu Teacher	pation / Job title (See Instructions			Employer (See Instructions Lockhart I;sd	<u>.</u> S)			

	MONET	ARY POLITICAL C	ONTRIBUTION	IS	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 7/17 Rpt: 10/29		
2	FILER NAME Democratic I	Non-Urban Caucus			3	Filer ID (Ethics Commission 00070512	Filers)	
4	Date 01/10/2024	5 Full name of contributor Lockhart, Mary Bell (Ms.)6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$10.00	
		Alpine, TX 79830						
8	Principal occu none	pation / Job title (See Instructions	9	Employer (See Instructions none	s)			
	Date 02/10/2024	Full name of contributor Lockhart, Mary Bell (Ms.) Contributor address; City; St	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$10.00	
	Principal occu	Alpine, TX 79830 pation / Job title (See Instructions		Employer (See Instructions	<u> </u> S)			
	Date 03/10/2024	Full name of contributor Lockhart, Mary Bell (Ms.) Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00	
	Principal occu	Alpine, TX 79830 pation / Job title (See Instructions)	Employer (See Instructions	 - s)			
	none			none				
	Date 04/10/2024	Full name of contributor Lockhart, Mary Bell (Ms.) Contributor address; City; St Alpine, TX 79830)		Amount of Contribution (\$)	\$10.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions none	<u>l</u> S)			
	Date 05/10/2024	Full name of contributor Lockhart, Mary Bell (Ms.) Contributor address; City; St Alpine, TX 79830	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00	
	Principal occu	pation / Job title (See Instructions		Employer (See Instructions none	5)			

	MONET	ARY POLITICAL CONT		SCHEDULE	■ A1		
	The Instru	ction Guide explains how to com	plete this forr	n.	1	Total pages Schedule A1: Sch: 8/17 Rpt: 11/29	
2	FILER NAME Democratic I	Non-Urban Caucus			3	Filer ID (Ethics Commission 00070512	Filers)
4	Date 06/07/2024	McCoy , Stephen (Mr.)	-state PAC (ID#:		7	Amount of Contribution (\$)	\$20.00
_	Deinoinal age	Sommerville, TX 77879	lo-	Franklauser (Coo lander setting	<u></u>		
8	none	pation / Job title (See Instructions)	9	Employer (See Instructions none	5)		
	Date 06/07/2024	Full name of contributor out-of- McNellie, Roger (Mr.) Contributor address; City; State; Zip C)		Amount of Contribution (\$)	\$20.00
	Principal occu	Nacogdoches, TX 75961 pation / Job title (See Instructions)		Employer (See Instructions	·/_		
	none	pation 7 300 title (See Instructions)		none)		
	Date 06/07/2024	Full name of contributor out-of- McNellie, Roger (Mr.) Contributor address; City; State; Zip C	state PAC (ID#: ode			Amount of Contribution (\$)	\$20.00
		Nacogdoches, TX 75961					
	Principal occu none	pation / Job title (See Instructions)		Employer (See Instructions none	5)		
	Date Full name of contributor out-of-state PAC (ID#: 05/04/2024 Mitchell, Marva (Ms.)					Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions none	5)		
	Date 05/04/2024	Full name of contributor out-of-O'Connor, Gary (Mr.) Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions none	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 9/17 Rpt: 12/29	
2	FILER NAME Democratic	Non-Urban Caucus			3	Filer ID (Ethics Commission 00070512	Filers)
4	Date 05/04/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$20.00
_	Delicalization	Tyler, TX 75703	10	Frankrije (Ozakastian			
8		pation / Job title (See Instructions) sales manager	9	Employer (See Instructions Firelight Books	5)		
	Date 01/01/2024	Full name of contributor out-of-state PAC (ID# Schenker, Rebecca (Ms.) Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$5.00
		La Grange, TX 78945	_				
	Principal occu Architect	pation / Job title (See Instructions)		Employer (See Instructions Weave Architecture	s)		
	Date 01/27/2024	Full name of contributor out-of-state PAC (ID# Schenker, Rebecca (Ms.) Contributor address; City; State; Zip Code	:)	•	Amount of Contribution (\$)	\$5.00
		La Grange, TX 78945					
	Principal occu Architect	pation / Job title (See Instructions)		Employer (See Instructions Weave Architecture	s)		
	Date 02/27/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00
	Principal occu Architect	La Grange, TX 78945 pation / Job title (See Instructions)		Employer (See Instructions Weave Architecture LLC			
	Date 03/27/2024	Full name of contributor out-of-state PAC (ID# Schenker, Rebecca (Ms.) Contributor address; City; State; Zip Code La Grange, TX 78945	:)		Amount of Contribution (\$)	\$5.00
	Principal occu Architect	pation / Job title (See Instructions)		Employer (See Instructions Weave Architecture LLC			
			1				

	MONET	ARY POLITICAL CO	SCHEDULE A1				
	The Instruc	ction Guide explains how t	o complete this for	n.	1	Total pages Schedule A1: Sch: 10/17 Rpt: 13/29	
2	FILER NAME Democratic I	Non-Urban Caucus			3	Filer ID (Ethics Commission 00070512	Filers)
4	Date 04/27/2024	5 Full name of contributor Schenker, Rebecca (Ms.)6 Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code		7	Amount of Contribution (\$)	\$5.00
_	<u> </u>	La Grange, TX 78945	la la	5 1 (0 1 1 "			
8	Architect	pation / Job title (See Instructions)	9	Employer (See Instructions Weave Architecture LLC			
	Date 05/27/2024	Full name of contributor Schenker, Rebecca (Ms.) Contributor address; City; State)		Amount of Contribution (\$)	\$5.00
		La Grange, TX 78945					
	Architect	pation / Job title (See Instructions)		Employer (See Instructions Weave Architecture LLC			
	Date 04/20/2024	Full name of contributor Scudder, Kendall (Mr.) Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$20.00
		Dallas, TX 75214					
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Armadilla Strategies LLC			
04/24/2024 Slater, Carolyn (Dr.)		out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$20.00	
	Principal occu Physician	Palestine, TX 75801 pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u>		
	Date 05/05/2024	Full name of contributor Smith, Oller (Mr.) Contributor address; City; State Tyler, TX 75707	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$20.00
	Principal occu none	pation / Job title (See Instructions)		Employer (See Instructions none	<u> </u>		
			<u>, </u>				

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 11/17 Rpt: 14/29			
2	FILER NAME Democratic Non-Urban Caucus				3	Filer ID (Ethics Commission 00070512	Filers)			
4	Date 01/05/2024			7	Amount of Contribution (\$)	\$10.00				
		Austin, TX 78751								
8	Principal occu none	pation / Job title (See Instructions	s)	9	Employer (See Instructions none	s)				
	Date Full name of contributor out-of-state PAC (ID#:) 02/05/2024 Spain, Diana (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00					
	Austin, TX 78751 Principal occupation / Job title (See Instructions) Employer (See Instruction				<u> </u>					
	none	panon, dos uno (eco mondono).	,		none	-,				
	Date Full name of contributor out-of-state PAC (ID#:) 03/05/2024 Spain, Diana (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00					
		Austin, TX 78751								
	Principal occu none	pation / Job title (See Instructions	5)		Employer (See Instructions none	5)				
	Date 04/05/2024	Full name of contributor Spain, Diana (Ms.) Contributor address; City; St Austin, TX 78751	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$10.00		
	Principal occu none	pation / Job title (See Instructions	5)		Employer (See Instructions none	5)				
	Date Full name of contributor out-of-state PAC (ID#:) 05/05/2024 Spain, Diana (Ms.) Contributor address; City; State; Zip Code Austin, TX 78751		-	Amount of Contribution (\$)	\$10.00					
	Principal occu none	pation / Job title (See Instructions	s)		Employer (See Instructions none	s)				
			-							

MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1			
	The Instruction Guide explains how to complete this form.				1	Total pages Schedule A1: Sch: 12/17 Rpt: 15/29			
2	FILER NAME Democratic I	Non-Urban Caucus			3	Filer ID (Ethics Commission 00070512	Filers)		
4	Date 06/05/2024 5 Full name of contributor out-of-state PAC (ID#:) Spain, Diana (Ms.) 6 Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$10.00					
_		Austin, TX 78751	1_		Ĺ				
8	none	pation / Job title (See Instructions)	9	Employer (See Instructions none	5)				
	Date Full name of contributor out-of-state PAC (ID#:) 05/04/2024 Tanneberger, Cherie (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00				
	Austin, TX 78751 Principal occupation / Job title (See Instructions) Employer (See Instructions				 s)				
	retired none								
	Date Full name of contributor out-of-state PAC (ID#:) 05/04/2024 Tanneberger, Cherie (Ms.) Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$20.00				
		Austin, TX 78751							
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions none	5)				
	Date Full name of contributor out-of-state PAC (ID#:) 05/05/2024 Taylor, Judy (Ms.) Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$20.00				
	Principal occu	Quitman, TX 75783 pation / Job title (See Instructions)		Employer (See Instructions none	<u> </u> S)				
	Date Full name of contributor out-of-state PAC (ID#:) 01/14/2024 Tucker, Clayton (Mr.) Contributor address; City; State; Zip Code Lampasas, TX 76550			Amount of Contribution (\$)	\$5.00				
	Principal occu Statewide Co	pation / Job title (See Instructions)		Employer (See Instructions Our Revolution Texas	5)				
	Statewide Of		<u> </u>	Car revolution Texas					

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 13/17 Rpt: 16/29			
2	FILER NAME Democratic I	FILER NAME Democratic Non-Urban Caucus			3	Filer ID (Ethics Commission 00070512	Filers)		
4	Date 01/01/2024 5 Full name of contributor out-of-state PAC (ID#:) Tucker, Clayton (Mr.) 6 Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$5.00					
_	Deinsinal	Lampasas, TX 76550		Foundation (October to the other time)					
8	Statewide Co	pation / Job title (See Instructions) oordinator	9	Employer (See Instructions Our Revolution Texas	5)				
	Date Full name of contributor out-of-state PAC (ID#:) 02/14/2024 Tucker, Clayton (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00				
	Lampasas, TX 76550 Principal occupation / Job title (See Instructions) Employer (See Instructions				<u> </u> ;)				
	Statewide Coordinator Our Revolution Texas		,						
	Date Full name of contributor out-of-state PAC (ID#:) 03/14/2024 Tucker, Clayton (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00				
		Lampasas, TX 76550							
	Principal occu Statewide Co	pation / Job title (See Instructions) oordinator		Employer (See Instructions Our Revolution Texas	5)				
	Date Full name of contributor out-of-state PAC (ID#:) 04/14/2024 Tucker, Clayton (Mr.) Contributor address; City; State; Zip Code Lampasas, TX 76550			Amount of Contribution (\$)	\$5.00				
	Principal occu Statewide Co	pation / Job title (See Instructions) pordinator		Employer (See Instructions Our Revolution Texas	5)				
	Date Full name of contributor out-of-state PAC (ID#:) 05/08/2024 Tucker, Clayton (Mr.) Contributor address; City; State; Zip Code Lampasas, TX 76550			Amount of Contribution (\$)	\$20.00				
	Principal occu Statewide Co	pation / Job title (See Instructions)		Employer (See Instructions Our Revolution Texas	5)				
	Statewide Of	55.311,465.		Sa. Noviduon Tonds					

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instruc	ction Guide explains how to co	mplete this form	n.	1	Total pages Schedule A1: Sch: 14/17 Rpt: 17/29		
2	FILER NAME Democratic Non-Urban Caucus				3	Filer ID (Ethics Commission 00070512	Filers)	
4	Date 06/14/2024 5 Full name of contributor out-of-state PAC (ID#:) Tucker, Clayton (Mr.) 6 Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$5.00				
_	Deignaignal	Lampasas, TX 76550	lo-	Frankrija (Coo kooku jekia ja				
8	Statewide Co	pation / Job title (See Instructions) pordinator	9	Employer (See Instructions Our Revolution Texas)			
	Date Full name of contributor out-of-state PAC (ID#:) 05/09/2024 Vaclav, Jerry (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00			
	Fredericksburg, TX 78624 Principal occupation / Job title (See Instructions) Employer (See Instructions)				<u> </u>			
	Peachy Clen Guesthouse Mgmt self		,					
	Date Full name of contributor out-of-state PAC (ID#:) 04/24/2024 Vogel, Vickie (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00			
		La Grange, TX 78945						
	Principal occu none	pation / Job title (See Instructions)		Employer (See Instructions none)			
	Date 05/04/2024	Full name of contributor out- Webster, Cecil (Mr.) Contributor address; City; State; Zip Carmine, TX 78932	of-state PAC (ID#:)		Amount of Contribution (\$)	\$20.00	
	Principal occu retired	pation / Job title (See Instructions)		Employer (See Instructions none	5)			
	Date O1/01/2024 Full name of contributor out-of-state PAC (ID#:) Wilkerson, D. Karen (Ms.) Contributor address; City; State; Zip Code Tyler, TX 75711			Amount of Contribution (\$)	\$50.00			
	Principal occu Retired	pation / 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: 15/17 Rpt: 18/29		
2	FILER NAME Democratic Non-Urban Caucus		3	Filer ID (Ethics Commission 00070512	ı Filers)			
4	Date 01/24/2024 5 Full name of contributor out-of-state PAC (ID#:) Wilkerson, D. Karen (Ms.) 6 Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$50.00				
_		Tyler, TX 75711	1_		_			
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions none	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 03/24/2024 Wilkerson, D. Karen (Ms.) Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$50.00			
	Tyler, TX 75711 Principal occupation / Job title (See Instructions) Employer (See Instructions				;) 			
	Retired none		-,					
	Date Full name of contributor out-of-state PAC (ID#:) 03/24/2024 Wilkerson, D. Karen (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00			
		Tyler, TX 75711						
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions none	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 04/24/2024 Wilkerson, D. Karen (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00			
	Principal occu Retired	Tyler, TX 75711 pation / Job title (See Instructions)		Employer (See Instructions none	<u> </u> 5)			
	Date Full name of contributor out-of-state PAC (ID#:) 05/25/2024 Wilkerson, D. Karen (Ms.) Contributor address; City; State; Zip Code Tyler, TX 75711			Amount of Contribution (\$)	\$50.00			
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions none	5)			

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 16/17 Rpt: 19/29			
2	FILER NAME Democratic	FILER NAME Democratic Non-Urban Caucus				3	Filer ID (Ethics Commission 00070512	Filers)		
4	Date 01/01/2024				7	Amount of Contribution (\$)	\$10.00			
		Austin, TX 78722								
8	Principal occu events coord	pation / Job title (See Instructions linator) 	9	Employer (See Instructions koop radio 91.7 fm	5)				
	Date Full name of contributor out-of-state PAC (ID#:) 1/22/2024 Yancy, Max (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00					
	Austin, TX 78722 Principal occupation / Job title (See Instructions) Employer (See Instruction				 s)					
	events coordinator koop radio 91.7 fm									
	Date Full name of contributor out-of-state PAC (ID#:) 102/22/2024 Yancy, Max (Mr.) Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$10.00					
		Austin, TX 78722								
	Principal occu events coord	pation / Job title (See Instructions linator	()		Employer (See Instructions koop radio 91.7 fm	5)				
	Date 03/22/2024	Full name of contributor Yancy, Max (Mr.) Contributor address; City; Si Austin, TX 78722	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$10.00		
	Principal occu Event Coord	pation / Job title (See Instructions inatior)		Employer (See Instructions Koop radio	5)				
	Date O4/22/2024 Full name of contributor out-of-state PAC (ID#:) Yancy, Max (Mr.) Contributor address; City; State; Zip Code Austin, TX 78722			•	Amount of Contribution (\$)	\$10.00				
	Principal occu Event Coord	pation / Job title (See Instructions inatior)		Employer (See Instructions Koop radio	5)				

MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 17/17 Rpt: 20/29		
FILER NAME Democratic	Non-Urban Caucus			3	Filer ID (Ethics Commission Filers) 00070512
					Amount of Contribution (\$) \$10.00
Principal occu	Austin, TX 78722 pation / Job title (See Instructions)	9	Employer (See Instructions)	
Event Coord			Koop radio		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

nse Travel Out of es/Contract Labor OTHER (ente

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/9 Rpt: 21/29	Democratic Non-Urban Caucus	00070512
4 Date	5 Payee name	•
01/14/2024	Act Blue Texas	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$0.60	P.O. Box441146	
Expenditure from corporate funds	Sommerville, MA 02144	
8 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
		usuage charge
		333490 314493
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/OI		5.1100 1.01u
Date	Davise name	
01/07/2024	Payee name Act Blue Texas	
		d-
Amount (\$)	Payee address; City; State; Zip Co	ue
\$1.20	P.O. Box441146	
Expenditure from corporate funds	Sommerville, MA 02144	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		usuage charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
experientare to benefit Great		
Date	Payee name	
01/01/2024	Act Blue Texas	
Amount (\$)	Payee address; City; State; Zip Co	de
\$0.20	P.O. Box441146	
Expenditure from		
corporate funds	Sommerville, MA 02144	
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
		usuage charge
Complete CNII V if alian-	Condidate/Officeholder nerse	obt
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sould	ght Office held
•		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Con-

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	
4 Tatal manua Cabadula E4.	
1 Total pages Schedule F1: Sch: 2/9 Rpt: 22/29	2 FILER NAME Democratic Non-Urban Caucus 3 Filer ID (Ethics Commission Filers) 00070512
4 Date	5 Payee name
01/01/2024	Act Blue Texas
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2.38	P.O. Box441146
Ψ2.30	F.O. D0X441140
Expenditure from corporate funds	Sommerville, MA 02144
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	usuage charge
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/01/2024	Act Blue Texas
Amount (\$)	Payee address; City; State; Zip Code
\$0.20	P.O. Box441146
Ψ0.20	1.0. 50.000
Expenditure from corporate funds	Sommerville, MA 02144
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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	usuage charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/22/2024	Act Blue Texas
Amount (\$)	Payee address; City; State; Zip Code
\$2.58	P.O. Box441146
φ2,30	1 .O. DOMPTITO
Expenditure from corporate funds	Sommerville, MA 02144
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.
LAI LINDITURE	Check if Austin, TX, officeholder living expense
	usuage fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
oroun out a ymon	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/9 Rpt: 23/29	Democratic Non-Urban Caucus 00070512
4 Date	5 Payee name
02/06/2024	Act Blue Texas
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1.40	P.O. Box441146
Expenditure from	Sommerville, MA 02144
corporate funds	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	usuage fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
01/31/2024	Act Blue Texas
Amount (\$)	Payee address; City; State; Zip Code
\$0.20	P.O. Box441146
Expenditure from corporate funds	Sommerville, MA 02144
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	usuage fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
03/20/2024	Act Blue Texas
Amount (\$)	
\$2.98	P.O. Box441146
Expenditure from	
corporate funds	Sommerville, MA 02144
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.
LAI LINDITURE	Check if Austin, TX, officeholder living expense
	charge for usuage
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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	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: 4/9 Rpt: 24/29	Democratic Non-Urban Caucus 00070512
4 Date	5 Payee name
03/27/2024	Act Blue Texas
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1.60	P.O. Box441146
Expenditure from corporate funds	Sommerville, MA 02144
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense usages charge
	usages charge
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	
Date	Payee name
04/21/2024	Act Blue Texas
Amount (\$)	Payee address; City; State; Zip Code
\$3.17	P.O. Box441146
Expenditure from corporate funds	Sommerville, MA 02144
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 charge for usuage
	Charge for usuage
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	
·	
Date	Payee name
04/21/2024	Act Blue Texas
Amount (\$)	Payee address; City; State; Zip Code
\$1.40	P.O. Box441146
Evnanditura fra	
Expenditure from corporate funds	Sommerville, MA 02144
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.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	usuasge charge
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/O	п

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

С	tributions/ Donations Made By Candidate/Officeholder/Politica dit Card Payment	/ - al Committee	Gift/Awards/Memorials Expended Services	Salaries/V	Wages/Contract Lab		Travel Out of Dis OTHER (enter a	strict category not listed above)
		T	The Instruction Guide e	Apiailis ilow to Co	mipiete this forn			
	pages Schedule F1:	1				3		(Ethics Commission Filers)
Scl	h: 5/9 Rpt: 25/29	Democration	Non-Urban Caucus				00070512	
4 Date		5 Payee name)					
04/2	9/2024	Act Blue Te	exas					
6 Amo	unt (\$)	7 Payee addre	ess; City;	State; Zip Co	ode			
	\$0.60	P.O. Box44	11146					
	penditure from porate funds	Sommervil	le, MA 02144					
	PURPOSE	(a) 0 .			(b) Description	nn.		
	OF	Fees	See Categories listed at the top	of this schedule)			de of Texas. Com	plete Schedule T.
EXF	PENDITURE	rees			_ =		officeholder living	
					usuage o	charge		
9 Com	plete ONLY if direct	Candidate/Of	ficeholder name	Office sou	<u>ı</u> ıght		Office he	eld
	nditure to benefit C/OI				3			
Date		Payee name	<u> </u>					
	2/2024	Act Blue Te						
Amo	unt (\$)	Payee addre		State; Zip Co	ode			
	\$0.79	P.O. Box44	11146					
- Evn	penditure from							
	porate funds	Sommervil	le, MA 02144					
Р	PURPOSE	(a) Category (s	See Categories listed at the top	of this schedule)	(b) Description	on		
EVE	OF PENDITURE	Fees			Check if	f travel outsi	de of Texas. Com	plete Schedule T.
LA	LINDITORL						officeholder living	expense
					usage co	ost		
	plete ONLY if direct		ficeholder name	Office sou	ıght		Office he	eld
expe	enditure to benefit C/OI	п 						
Date		Payee name	<u> </u>					
04/2	4/2024	Act Blue To	exas					
Amo	unt (\$)	Payee addre	ess; City;	State; Zip Co	ode			
	\$5.35	P.O. Box44	•					
	72.30		-					
	penditure from	Commonil	lo MA 02144					
	porate funds	Julilleivii	le, MA 02144		l			
P	PURPOSE OF		See Categories listed at the top	of this schedule)	(b) Description		do of T	plata Cabadula T
EXF	PENDITURE	Fees					de of Texas. Comp officeholder living	
					usage fe		ourcenning living	l evhense
					usaye le	,		
Com	ploto ONI V if direct	Candidata/Of	ficeholder name	Office	laht.		Office he	old.
	plete <u>ONLY</u> if direct anditure to benefit C/OI		icentituel ridifie	Office sou	ıyılı		Office ne	iu
				distance de la constanción				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·		3 Filer ID (Ethics Commission Filers)
Sch: 6/9 Rpt: 26/29	Democratic Non-Urban Caucus		00070512
4 Date	5 Payee name		-
05/05/2024	Act Blue Texas		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
\$12.06	P.O. Box441146		
¥22.00			
Expenditure from corporate funds	Sommerville, MA 02144		
8 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 charge for usage
			charge for usage
O Commission ONLY if dispose	Condidate/Officeholder name		Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou H	ıgnt	Office held
·			
Date	Payee name		
05/09/2024	Act Blue Texas		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$732.00	P.O. Box441146		
Expenditure from corporate funds	Sommerville, MA 02144		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF	Fees	` ′	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE			Check if Austin, TX, officeholder living expense
			usage charge
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught	Office held
experioliture to benefit C/Oi	1		
Date	Payee name		
06/13/2024	Act Blue Texas		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$4.43	P.O. Box441146		
Expenditure from corporate funds	Sommerville, MA 02144		
PURPOSE	() -	(h)	Description
OF	(a) Category (See Categories listed at the top of this schedule) Fees	(5)	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	1 663		Check if Austin, TX, officeholder living expense
			usage charge
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	Office held
expenditure to benefit C/O	H		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

rsement Solicitation/Fundraising Expense
Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
Labor OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to complete t	his form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 7/9 Rpt: 27/29	Democratic Non-Urban Caucus	00070512
4 Date	5 Payee name	
06/09/2024	Act Blue Texas	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$5.74	P.O. Box441146	
Expenditure from corporate funds	Sommerville, MA 02144	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	scription
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense age fee
	usi	aye ree
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		Office field
Date	Payee name	
01/22/2024	Nation Builder	
Amount (\$)	Payee address; City; State; Zip Code	
\$55.00	6515 W Sunset Blvd	
	Ste 440	
Expenditure from corporate funds	Los Angeles, CA 90028	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	scription
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
	CO	mputer data service
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	H	
Date	Payee name	
02/22/2024	Nation Builder	
Amount (\$)	Payee address; City; State; Zip Code	
\$55.00	6515 W Sunset Blvd	
,,,,,,,	Ste 440	
Expenditure from		
corporate funds	Los Angeles, CA 90028	
PURPOSE OF		Scription
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		The state of the s
	Li ma	onthly charge for computer work
	mc	onthly charge for computer work
Complete ONLY if direct		· ·
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	onthly charge for computer work Office held
	Candidate/Officeholder name Office sought	· ·
	Candidate/Officeholder name Office sought	· ·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to cor	nplete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
Sch: 8/9 Rpt: 28/29	Democratic Non-Urban Caucus	00070512		
4 Date	5 Payee name			
03/22/2024	Nation Builder			
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de		
\$55.00	6515 W Sunset Blvd			
	Ste 440			
Expenditure from corporate funds	Los Angeles, CA 90028			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Data software monthly cost		
		Data software monthly cost		
Complete ONLY if direct	Candidate/Officeholder name Office sour	Office hold		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		oht Office held		
Date	Payee name			
04/22/2024	Nation Builder			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$55.00	6515 W Sunset Blvd			
	Ste 440			
Expenditure from corporate funds	Los Angeles, CA 90028			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense		
		data base charges		
Commission ONII V if dispose	Condidate/Officeholder nome	office hold		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght Office held		
Date	Payee name			
05/21/2024	Nation Builder			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$55.00	6515 W Sunset Blvd			
	Ste 440			
Expenditure from corporate funds	Los Angeles, CA 90028			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Fees	Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE		Check if Austin, TX, officeholder living expense		
		monthly usage cost for software		
Complete ONLY if direct	Candidate/Officeholder name Office sough	ght Office held		
expenditure to benefit C/OH				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee 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
OTHEP (expense a category not listed above)

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/9 Rpt: 29/29	Democratic Non-Urban Caucus 00070512
4 Date	5 Payee name
06/22/2024	Nation Builder
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$55.00	6515 W Sunset Blvd
	Ste 440
Expenditure from corporate funds	Los Angeles, CA 90028
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	computer data system
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/04/2024	Scoot Around
Amount (\$)	Payee address; City; State; Zip Code
\$288.00	2507 Investors Row Ste100
\$200.00	Unit B7
Expenditure from	
corporate funds	Orlando, FL 32837
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Rental cost for Scooters at
	Convention
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held