#### 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) 00086854 3 COMMITTEE NAME **OFFICE USE ONLY Texas Progressive Caucus** Date Received **ELECTRONICALLY FILED** 02/05/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 59 Date Hand-delivered or Date Postmarked Change of Address Lampasas, TX 76550 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Kristi NAME NICKNAME LAST **SUFFIX** Lara STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 6600 Preston Rd STREET **ADDRESS** #2023 (Residence or Business) Plano, TX 75024 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 59 MAILING **ADDRESS** Lampasas, TX 76550 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 694-1808 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) X **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2024 01/25/2024 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

12 COMMITTEE NAME	<del></del>		13 Filer ID	(Ethics Commission Filers)
Texas Progressive Ca	ucus		00086854	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Democrat		
(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		
		э. Эрросси		
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	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	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,218.50
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	613.03
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	22,903.77
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			I	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Krist	ti Lara	
		Signature of Ca	ımpaign Treası	ırer
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said	, t	his the	day
		which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of offi	cer administering oath

### **SUBTOTALS - GPAC**

## FORM **GPAC**COVER SHEET PG 3

		3 of 14
17 COMMITTEE NAME Texas Progressive Caucus	<b>18</b> Filer ID 00086854	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE	I	SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 1,218.50
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUT	FIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION	ON OR LABOR	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROI LABOR ORGANIZATION	M CORPORATION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR I	LABOR ORGANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION ORGANIZATION	I OR LABOR	\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION	OR LABOR ORGANIZATION	\$
9. SCHEDULE E: LOANS		\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CON	ITRIBUTIONS	\$ 613.03
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL C	:ONTRIBUTIONS	\$
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL C	ONTRIBUTIONS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTI	RIBUTIONS RETURNED	\$

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how to	complete this forr	n.	1	Total pages Schedule A1: Sch: 1/5 Rpt: 4/14	
2	Price Progressive Caucus  Progressive Caucus		3	Filer ID (Ethics Commission 00086854	ı Filers)		
4	Date 01/09/2024	<ul><li>5 Full name of contributor Brown, D. Ivi</li><li>6 Contributor address; City; State;</li></ul>		)	7	Amount of Contribution (\$)	\$10.00
•	Principal occu	Dallas, TX 75230 pation / Job title (See Instructions)	ام	Employer (See Instructions	_		
0		apist and Social Worker	l <sup>9</sup>	Employer (See Instructions Pending	')		
	Date 01/09/2024	Full name of contributor Clark, Nathan  Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2.50
		Rockwall, TX 75087					
	Surveyor	pation / Job title (See Instructions)		Employer (See Instructions Ltra	5)		
	Date 01/22/2024	Full name of contributor  Clem, Ted  Contributor address; City; State;	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
		Austin, TX 78701					
	Principal occu Physicist	pation / Job title (See Instructions)		Employer (See Instructions EPS Corp	i)		
	Date 01/02/2024	Full name of contributor Fladmark, Michael Contributor address; City; State; Tool, TX 75143	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu Solar Design	pation / Job title (See Instructions) n Consultant		Employer (See Instructions Self	5)		
	Date 01/16/2024	Full name of contributor Fuller, Jeanne Contributor address; City; State; San Antonio, TX 78248	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	Principal occu web-building	pation / Job title (See Instructions)		Employer (See Instructions	·)		
	Sanunig	,, <u>.</u>					

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1				
	The Instru	ction Guide explains how	<i>t</i> to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/5 Rpt: 5/14	
2	Priler NAME Texas Progressive Caucus		3	Filer ID (Ethics Commission 00086854	ı Filers)		
4	Date 01/24/2024    5 Full name of contributor		7	Amount of Contribution (\$)	\$10.00		
8	Principal occu Not Employe	San Antonio, TX 78209 pation / Job title (See Instructionsed	s) !	Employer (See Instructions     Not Employed	<u> </u> s)		
	Date 01/02/2024	Full name of contributor Lugo, Judy Contributor address; City; S El Paso, TX 79930	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$10.00
	Principal occu Retired	pation / Job title (See Instructions	5)	Employer (See Instructions Retired	<u>                                      </u>		
	Date 01/22/2024	Full name of contributor MacDougal, Vanessa Contributor address; City; S	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Austin, TX 78757 pation / Job title (See Instructions	s) [	Employer (See Instructions	<u> </u>		
	software eng		,	Rapid7	,		
	Date 01/09/2024	Full name of contributor Natsheh, Hatem Contributor address; City; S Austin, TX 78739	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
	Principal occu kwik mart	pation / Job title (See Instructions	5)	Employer (See Instructions self employed	<u>I</u> S)		
	Date 01/03/2024	Full name of contributor Porter, Rachel Contributor address; City; S San Antonio, TX 78213	out-of-state PAC (ID#:	)	•	Amount of Contribution (\$)	\$1.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	(5)	Employer (See Instructions Not Employed	s)		

	MONEI	ARY POLITICAL C	ONTRIBUTION	15		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 3/5 Rpt: 6/14	
2	FILER NAME Texas Progr	essive Caucus			3	Filer ID (Ethics Commission 00086854	Filers)
4	Date		Out of state DAC (ID#)	,	-	Amount of Contribution (\$)	
-	01/09/2024				Amount of Contribution (4)	\$10.00	
		Fort Worth, TX 76107					
8	Principal occu Entrepreneu	pation / Job title (See Instructions)	9	Employer (See Instructions Self employed	5)		
	Date	Full name of contributor	David of state DAC (ID)		Г	Amount of Contribution (\$)	
	01/24/2024	Richardson, Corrine	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
	01/24/2024		. 7 0 1				Ψ3.00
		Contributor address; City; Sta	ate; Zip Code				
		Cedar Park, TX 78613					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>.                                    </u>		
	Congression	al aid		U.S. House of Represer	ntai	ives	
	Date Full name of contributor out-of-state PAC (ID#:)		)		Amount of Contribution (\$)		
	01/02/2024	Robinson, Kimmy					\$5.00
		Contributor address; City; Sta	ate; Zip Code		1		
	Delivational	Farmers Branch, TX 7523		Formula de la descritación de	<u></u>		
	Principal occu Paralegal	pation / Job title (See Instructions)		Employer (See Instructions Wilson Elser Moskowitz		lalman & Dicker II D	
				WIISON EISEI WOSKOWIZ			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	***
	01/03/2024	Sanders, Katherine					\$30.00
		Contributor address; City; Sta	ate; Zip Code				
		Cleburne, TX 76033					
	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	<u>L</u>		
	Not Employe	ed		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	01/02/2024	Schoonover, Carla	<u> </u>				\$30.00
		Contributor address; City; Sta	ate; Zip Code				
		Palo Pinto, TX 76484					
		pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Professional			TMI			

				SCHEDOL	E A1
The Instru	uction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 4/5 Rpt: 7/14	
2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
Texas Prog	ressive Caucus			00086854	
4 Date 01/11/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1,000.00
	Houston, TX 77024				
8 Principal occ President	supation / Job title (See Instructions)	P Employer (See Instructions Texas Clinic	s)		
Date 01/19/2024				Amount of Contribution (\$)	\$10.00
	Arlington, TX 76002	- 100	<u></u>		
Principal occ Not Employ	rupation / Job title (See Instructions) ved	Employer (See Instructions Not Employed	S)		
Date 01/09/2024		)		Amount of Contribution (\$)	\$5.00
	McKinney, TX 75070				
Principal occ CEO	upation / Job title (See Instructions)	Employer (See Instructions KJMB Solutions, Inc.	5)		
Date 01/02/2024	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00
Principal occ Sound Des	Houston, TX 77057  upation / Job title (See Instructions) igner	Employer (See Instructions Self	<u> </u> s)		
Date 01/02/2024	Full name of contributor out-of-state PAC (ID#: Vernon, Frances  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00
	Wichita Falls, TX 76308				
Principal occ Not Employ	rupation / Job title (See Instructions) ved	Employer (See Instructions Not Employed	s)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 5/5 Rpt: 8/14	
2	FILER NAME Texas Progressive Caucus		3	Filer ID (Ethics Commission F 00086854	ilers)	
4			7	Amount of Contribution (\$)	\$5.00	
•	Dringing Loggy	Houston, TX 77092	Contour (Contractions	<u></u>		
8	Principal occu Program Ass	pation / Job title (See Instructions) sistant	Employer (See Instructions     Concordis	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  01/22/2024 Voraman, Albert  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00	
	Principal occu	Houston, TX 77092  pation / Job title (See Instructions)	Employer (See Instructions	  -  s)		
	Program Ass		Concordis	,		
	Date 01/13/2024	Full name of contributor out-of-state PAC (ID#:_ Washburn, Ty  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00
		Weatherford, TX 76086				
	Principal occu IT Analyst	pation / Job title (See Instructions)	Employer (See Instructions HF Sinclair	5)		
	Date 01/09/2024	Full name of contributor out-of-state PAC (ID#:_Yancy, Max  Contributor address; City; State; Zip Code  Austin, TX 78765			Amount of Contribution (\$)	\$5.00
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Volunteer &	Events Coordinator	KOOP Radio 91.7 FM			

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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/Officenolder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/6 Rpt: 9/14	Texas Progressive Caucus 00086854
4 Date	5 Payee name
01/07/2024	ActBlue
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3.61	PO Box 441146
Expenditure from corporate funds	Somerville, 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  Credit Card Fee
	Cleuit Calu Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
oxportantaro to sorione or o	
Date	Payee name
01/14/2024	ActBlue
Amount (\$)	Payee address; City; State; Zip Code
\$37.90	PO Box 441146
Expenditure from corporate funds	Somerville, 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
	Credit Card Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to better 6/01	'
Date	Payee name
01/21/2024	ActBlue
Amount (\$)	Payee address; City; State; Zip Code
\$1.00	PO Box 441146
·	
Expenditure from corporate funds	Somerville, 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
	Credit Card Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

#### 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 By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 2/6 Rpt: 10/14	Texas Progressive Caucus 00086854
4 Date	5 Payee name
01/14/2024	Google LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6.40	1600 Amphitheatre Pkwy
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Email service
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/16/2024	Nationbuilder
Amount (\$)	Payee address; City; State; Zip Code
\$424.00	6515 W Sunset Blvd
Expenditure from	Ste 440
corporate funds	Los Angeles, CA 90028
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Database
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/02/2024	Stripe
Amount (\$)	Payee address; City; State; Zip Code
\$0.55	3180 18th Street Suite 100
Expenditure from corporate funds	San Francisco, CA 94110
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  Credit Card Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 3/6 Rpt: 11/14	Texas Progressive Caucus  00086854
4 Date	5 Payee name
01/02/2024	Stripe
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$0.79	3180 18th Street Suite 100
Ψ0.13	5100 Total State State 100
Expenditure from corporate funds	San Francisco, CA 94110
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
	Credit Card Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
01/09/2024	Stripe
Amount (\$)	Payee address; City; State; Zip Code
\$0.55	3180 18th Street Suite 100
40.00	
Expenditure from corporate funds	San Francisco, CA 94110
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.
	Credit Card Fee
	Credit Card Fee
0 1 0 0 1 0 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/09/2024	Stripe
Amount (\$)	Payee address; City; State; Zip Code
\$0.79	3180 18th Street Suite 100
Ψ0.13	5100 Total State State 100
Expenditure from corporate funds	San Francisco, CA 94110
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 LINDITORE	Check if Austin, TX, officeholder living expense
	Credit Card Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
SAPORAREIO TO BOTTOTIC O/OI	•

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 4/6 Rpt: 12/14	Texas Progressive Caucus 00086854	
4 Date	5 Payee name	
01/09/2024	Stripe	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$0.79	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
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  Credit Card Fee	
	Credit Card Fee	
O Committee Chillian in	Openhidate (Office health are nown)	_
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
01/09/2024	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	_
\$0.79	3180 18th Street Suite 100	
,,,,,		
Expenditure from	Con Francisco CA 04440	
corporate funds	San Francisco, CA 94110	
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  Credit Card Fee	
	Credit Card Fee	
Operation ONLY if alice at	Occadidate (Office health are reserved)	_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
		_
Date	Payee name	
01/09/2024	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	_
\$0.42	3180 18th Street Suite 100	
Expenditure from	San Francisco, CA 94110	
corporate funds	San Francisco, CA 94110	
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  Credit Card Fee	
	Ground Gara Foo	
Complete CNII V if direct	Candidate/Officeholder name Office cought Office hold	_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
p = 1 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2		
		_

### 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

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 compl	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 5/6 Rpt: 13/14	Texas Progressive Caucus	00086854
4 Date	5 Payee name	'
01/13/2024	Stripe	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$0.55	3180 18th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
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
		Credit Card Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		2.002.000
Date	Payee name	
01/22/2024	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$0.55	3180 18th Street Suite 100	
Ψ0.55	3100 10th Street Suite 100	
Expenditure from corporate funds	San Francisco, CA 94110	
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  Credit Card Fee
		Great Gara Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	9	Cinica Hold
Date	Payee name	
01/22/2024	Stripe	
Amount (\$)	Payee address; City; State; Zip Code	
\$0.79	3180 18th Street Suite 100	
— Foresaditure from		
Expenditure from corporate funds	San Francisco, CA 94110	
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  Credit Card Fee
		Great Gara i de
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		Office field

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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 Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 6/6 Rpt: 14/14	Texas Progressive Caucus 00086854
4 Date	5 Payee name
01/24/2024	Stripe
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$0.55	3180 18th Street Suite 100
Expenditure from corporate funds	San Francisco, CA 94110
8 PURPOSE	(b) Description
OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Credit Card Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date	Payee name
01/15/2024	Texas Democratic Women
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	P.O. Box 301411
Expenditure from corporate funds	Austin, TX 78703
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Event Expense  Cry Category (See Categories listed at the top of this schedule)  Event Expense  Cry Category (See Categories listed at the top of this schedule)  Cry Category (See Categories listed at the top of this schedule)
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Event sponsorship
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>-1</del>
Date	Payee name
01/16/2024	Payee name USPS
Amount (\$)	Payee address; City; State; Zip Code
\$33.00	1700 Fourth St
Expenditure from	
corporate funds	Lampasas, TX 76550
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Solicitation/Fundraising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Stamps for thank you letters
_	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1