

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

|                                                                                               |                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                  |                                  |
|-----------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|
| <b>The GPAC Instruction Guide explains how to complete this form.</b>                         |                                                                                                                                                                                                                                                                                                                                                      | <b>1</b> Filer ID<br>(Ethics Commission Filers)<br>00037874                                                                                                                                      | <b>2</b> Total pages filed:<br>4 |
| <b>3</b> COMMITTEE NAME<br>Greater Height Democratic Club                                     |                                                                                                                                                                                                                                                                                                                                                      | <b>OFFICE USE ONLY</b>                                                                                                                                                                           |                                  |
|                                                                                               |                                                                                                                                                                                                                                                                                                                                                      | Date Received<br>ELECTRONICALLY FILED<br>02/26/2024                                                                                                                                              |                                  |
|                                                                                               |                                                                                                                                                                                                                                                                                                                                                      | Date Hand-delivered or Date Postmarked                                                                                                                                                           |                                  |
|                                                                                               |                                                                                                                                                                                                                                                                                                                                                      | Receipt #                                                                                                                                                                                        | Amount                           |
|                                                                                               |                                                                                                                                                                                                                                                                                                                                                      | Date Processed                                                                                                                                                                                   |                                  |
|                                                                                               |                                                                                                                                                                                                                                                                                                                                                      | Date Imaged                                                                                                                                                                                      |                                  |
| <b>4</b> COMMITTEE ADDRESS<br><br><input type="checkbox"/> Change of Address                  | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>5640 Kiam St<br><br>Houston, TX 77007                                                                                                                                                                                                                                                      |                                                                                                                                                                                                  |                                  |
|                                                                                               | <b>5</b> CAMPAIGN TREASURER NAME<br><br>MS / MRS / MR FIRST MI<br>Ms. Sae                                                                                                                                                                                                                                                                            | NICKNAME LAST SUFFIX<br>Deshpande                                                                                                                                                                |                                  |
| <b>6</b> CAMPAIGN TREASURER STREET ADDRESS<br><br>(Residence or Business)                     | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>5640 Kiam St<br><br>Houston, TX 77007                                                                                                                                                                                                                                     |                                                                                                                                                                                                  |                                  |
| <b>7</b> CAMPAIGN TREASURER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>5640 Kiam St<br><br>Houston, TX 77007                                                                                                                                                                                                                                                      |                                                                                                                                                                                                  |                                  |
| <b>8</b> CAMPAIGN TREASURER PHONE                                                             | AREA CODE PHONE NUMBER EXTENSION<br>(214) 724-7765                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                  |                                  |
| <b>9</b> REPORT TYPE                                                                          | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)<br><input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination<br><input type="checkbox"/> Runoff |                                                                                                                                                                                                  |                                  |
| <b>10</b> PERIOD COVERED                                                                      | Month Day Year      Month Day Year<br>01/26/2024      THROUGH      02/24/2024                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                  |                                  |
| <b>11</b> ELECTION                                                                            | ELECTION DATE<br>Month Day Year<br>03/05/2024                                                                                                                                                                                                                                                                                                        | ELECTION TYPE<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |                                  |

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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

|                                                            |                                                           |
|------------------------------------------------------------|-----------------------------------------------------------|
| <b>12 COMMITTEE NAME</b><br>Greater Height Democratic Club | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00037874 |
|------------------------------------------------------------|-----------------------------------------------------------|

|                                                                                                         |                                                                                              |                       |
|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|-----------------------|
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)             | A. Supported Democrat |
|                                                                                                         |                                                                                              | B. Opposed            |
|                                                                                                         | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)       | A. Supported          |
|                                                                                                         |                                                                                              | B. Opposed            |
|                                                                                                         | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.) |                       |
|                                                                                                         |                                                                                              |                       |

|                               |                                                                                                                                              |             |
|-------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| <b>15 CONTRIBUTION TOTALS</b> | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> | \$ 0.00     |
|                               | <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold                                 |             |
|                               | <b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>                                                  | \$ 55.00    |
| EXPENDITURE TOTALS            | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>                                                                                            | \$ 0.00     |
|                               | <b>4. TOTAL POLITICAL EXPENDITURES</b>                                                                                                       | \$ 0.00     |
| CONTRIBUTION BALANCE          | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>                                                | \$ 4,646.73 |
| OUTSTANDING LOAN TOTALS       | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>                                         | \$ 0.00     |

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ms. Saeesh Deshpande  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
3 of 4

|                                                            |                                                                                                                   |                                                           |
|------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>17 COMMITTEE NAME</b><br>Greater Height Democratic Club |                                                                                                                   | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00037874 |
| <b>19 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE           |                                                                                                                   | SUBTOTAL AMOUNT                                           |
| 1.                                                         | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                 | \$ 55.00                                                  |
| 2.                                                         | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                              | \$                                                        |
| 3.                                                         | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS                                                        | \$                                                        |
| 4.                                                         | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION               | \$                                                        |
| 5.                                                         | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$                                                        |
| 6.                                                         | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                     | \$                                                        |
| 7.                                                         | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                 | \$                                                        |
| 8.                                                         | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION                 | \$                                                        |
| 9.                                                         | <input type="checkbox"/> SCHEDULE E: LOANS                                                                        | \$                                                        |
| 10.                                                        | <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                         | \$                                                        |
| 11.                                                        | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                                 | \$                                                        |
| 12.                                                        | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                        | \$                                                        |
| 13.                                                        | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                            | \$                                                        |
| 14.                                                        | <input 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**

|                                                                              |                                                                                                             |                                                           |
|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>             |                                                                                                             | <b>1</b> Total pages Schedule A1:<br>Sch: 1/1 Rpt: 4/4    |
| <b>2</b> FILER NAME<br>Greater Height Democratic Club                        |                                                                                                             | <b>3</b> Filer ID (Ethics Commission Filers)<br>00037874  |
| <b>4</b> Date<br>02/13/2024                                                  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Andrews, Martha | <b>7</b> Amount of Contribution (\$)<br><br>\$35.00       |
|                                                                              | <b>6</b> Contributor address; City; State; Zip Code<br><br>Houston, TX 77009                                |                                                           |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |                                                                                                             | <b>9</b> Employer (See Instructions)<br>Not Employed      |
| <b>Date</b><br>02/05/2024                                                    | <b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Croffie, Brandi   | <b>Amount of Contribution (\$)</b><br><br>\$20.00         |
|                                                                              | <b>Contributor address; City; State; Zip Code</b><br><br>Houston, TX 77055                                  |                                                           |
| <b>Principal occupation / Job title (See Instructions)</b><br>Lawyer         |                                                                                                             | <b>Employer (See Instructions)</b><br>Hoover Slovacek LLP |