

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Texas Democratic Veterans Caucus	13 Filer ID (Ethics Commission Filers) 00066791
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	137.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	8,816.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	200.00

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.

Mr. John O. Applewhaite

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 - MPAC

17 COMMITTEE NAME Texas Democratic Veterans Caucus		18 Filer ID (Ethics Commission Filers) 00066791
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 137.00
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 checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 46.51
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/6
2 FILER NAME Texas Democratic Veterans Caucus		3 Filer ID (Ethics Commission Filers) 00066791
4 Date 01/31/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Kenneth	7 Amount of Contribution (\$) \$16.00
	6 Contributor address; City; State; Zip Code El Paso, TX 79925	
8 Principal occupation / Job title (See Instructions) Soldier		9 Employer (See Instructions) US Army Reserves
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chism, Crystal	Amount of Contribution (\$) \$16.00
	Contributor address; City; State; Zip Code DeSoto, TX 75115	
Principal occupation / Job title (See Instructions) Job		Employer (See Instructions) Have One
Date 02/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LANGE, MICHAEL	Amount of Contribution (\$) \$16.00
	Contributor address; City; State; Zip Code Houston, TX 77096	
Principal occupation / Job title (See Instructions) PRIVATE INVESTMENTS- HEAD OF INVESTMENT		Employer (See Instructions) ARIEL(USA) EQUITIES
Date 02/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Tammi	Amount of Contribution (\$) \$16.00
	Contributor address; City; State; Zip Code Cibolo, TX 78108	
Principal occupation / Job title (See Instructions) Federal Employee		Employer (See Instructions) US Government
Date 02/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Payne, Douglas	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76112	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/6
2 FILER NAME Texas Democratic Veterans Caucus		3 Filer ID (Ethics Commission Filers) 00066791
4 Date 01/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quincy, Patrick	7 Amount of Contribution (\$) \$16.00
6 Contributor address; City; State; Zip Code Rosenberg, TX 77469		
8 Principal occupation / Job title (See Instructions) Law Enforcement		9 Employer (See Instructions) Fort Bend County
Date 01/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villarreal, Ricardo	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code San Antonio, TX 78230		
Principal occupation / Job title (See Instructions) Healthcare Administrator		Employer (See Instructions) Brooke Army Medical Center
Date 01/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Martha	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code Fort Worth, TX 76137		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt: 6/6	2 FILER NAME Texas Democratic Veterans Caucus	3 Filer ID (Ethics Commission Filers) 00066791
4 Date 02/25/2024	5 Payee name ActBlue LLC.	
6 Amount (\$) 5.47 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 14 Arrow Street Suite 11 Cambridge, MA 02138	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donations Fees
Date 02/02/2024	Payee name Google Inc	
Amount (\$) 12.79 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1600 Amphitheatre Parkway Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Cloud Storage	(b) Description (See instructions regarding type of information required.) Cloud Storage for TDV documents
Date 02/12/2024	Payee name Mail Chimp	
Amount (\$) 28.25 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 675 Ponce De Leon Ave NE Suite 5000 Atlanta , GA 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Mail Chimp Mass Mailing