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) 00015969 3 COMMITTEE NAME **OFFICE USE ONLY** Davidson Troilo Ream and Garza Committee for Civic Awareness Date Received **ELECTRONICALLY FILED** 03/04/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 601 NW Loop 410 Date Hand-delivered or Date Postmarked Suite 100 Change of Address San Antonio, TX 78216-5511 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Frank J. NAME NICKNAME LAST **SUFFIX** Garza STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 601 NW Loop 410 Ste. 100 STREET **ADDRESS** (Residence or Business) San Antonio, TX 78216 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 601 NW Loop 410 Ste. 100 MAILING **ADDRESS** San Antonio, TX 78216 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (210) 442-2309 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/26/2024 02/24/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 General Special

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Davidson Troilo Rea	m and Garza Committee	for Civic Awareness	00015969)
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		
	0.11	A Company		
	Measures (Describe by date and location	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	3. Officeholders	Elizabeth Campos State Repre	esentative	
	Assisted (Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION		D POLITICAL CONTRIBUTIONS (OTHER THAN		
TOTALS	CONTRIBUTIONS N	OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICA	qualifies for the higher itemization threshold		
		EDGES, LOANS, OR GUARANTEES OF LOANS)	 \$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	250.00
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		534.91
OUTSTANDING LOAN TOTALS	I	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		0.00
6 AFFIDAVIT	L		<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Frank J. Garza		
		Signature of Ca	mpaign Treası	urer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	oed before me, by the said _	, tł	nis the	day
		which, witness my hand and seal of office.		
Ciana at 1 m	dustrate de la constante d	Drivet durant of Minney de la	Ti4 6 60	and advantation of the state of
Signature of officer	administering oath	Printed name of officer administering oath	TILLE OT OTTI	cer administering oath

SUBTOTALS - GPAC

FORM GPAC **COVER SHEET PG 3**

			3 of 5		
17 COMMITTE	EE NAME	18 Filer ID	(Ethics Commission Filers)		
Davidson	T				
NAME OF	SUBTOTAL AMOUNT				
1.	\$				
2.	\$				
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS				
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$		
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION				
6.	6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION				
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	\$ 250.00		
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
14. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$ 10.00		
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 1/1 Rpt: 4/5	2 FILER NAME Davidson Troilo Ream and Garza Committee for Civic 3 Filer ID (Ethics Commission Filers) 00015969
4 Date 02/21/20246 Amount (\$)	 5 Payee name Elizabeth "Liz" Campos Campaign 7 Payee address; City; State; Zip Code
\$250.00	1028 Rigsby
corporate funds	San Antonio, TX 78210
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

	AL EXPENDITURES POLITICAL CONTRIBUTIONS	SCHEDULE				
The Instruction Guide explains how to complete this form.						
Total pages Schedule I: Sch: 1/1 Rpt: 5/5	2 FILER NAME Davidson Troilo Ream and Garza Committee for Civic	3 Filer ID (Ethics Commission Filers) 00015969				
Date 01/31/2024	5 Payee name PlainsCapital Bank					
Amount (\$) 10.00 Expenditure from	7 Payee Address; City; State; Zip PO Box 271					
corporate funds PURPOSE OF EXPENDITURE	1, , = =====	instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)				