MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

F			1 Filer ID	2 Total names filed:			
Tł	ne MPAC Instruction (2 Total pages filed: 8					
3	COMMITTEE NAME	OFFICE USE ONLY					
	Bosque Democration	c Club		Date Received			
				03/05/2024			
Ļ				03/03/2024			
4	COMMITTEE ADDRESS		CITY; STATE; ZIP				
		P.O. Box 291					
	Change of Address	Moridian TV 7666E					
L		Meridian, TX 76665		Date Hand-delivered or Date Postmarked			
5	CAMPAIGN TREASURER	MS / MRS / MR FIRST	MI	Descript //			
	NAME	Mr. Albert		Receipt # Amount			
				Date Processed			
		NICKNAME LAST	SUI	FIX			
		Hunter		Date Imaged			
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY;	STATE: ZIP CODE			
	TREASURER	PO Box 291					
	STREET ADDRESS						
	(Residence or Business)	Meridian, TX 76665					
Ŀ	0.000						
7	CAMPAIGN TREASURER	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY;	STATE; ZIP CODE			
	MAILING	PO Box 291					
	ADDRESS						
	Change of Address	Meridian, TX 76665					
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION				
	TREASURER PHONE	(254) 366-8439					
9	REPORT TYPE	X Monthly	10th day after campaign	Dissolution (Attach PAC-DR)			
		X Wonthly	L treasurer termination				
10	MONTHLY		r Datur				
	REPORT FILING DEADLINE	January 5 April	5 July 5	October 5			
		February 5 May	5 August 5	November 5			
		X March 5 June	5 September !	5 December 5			
11		Month Day Year	Moi	nth Day Year			
	COVERED	01/26/2024	02/	25/2024			
	GO TO PAGE 2						
L Fo	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.5b35d027						

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME 13 File			r ID	(Ethics Commission Filers)		
Bosque Democratic Club 000			70096			
14 COMMITTEE	1. Candidates	A. Supported	Brain Walbridge USC	ongress 31		
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 (Describe by date and location of election and nature of issue.)	A. Supported				
		D. O				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if					
	applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANT ADE ELECTRO		HAN	\$	0.00
	2. TOTAL POLITICA	•	•		\$	
	(OTHER THAN PLEI	DGES, LOANS,	OR GUARANTEES OF LO	ANS)	Ψ.	300.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL E	XPENDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDIT	URES		\$	300.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING		NS MAINTAINED AS OF TH	E LAST DAY	\$	7,367.72
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL / LAST DAY OF THE F		LL OUTSTANDING LOANS ERIOD	AS OF THE	\$	0.00
16 AFFIDAVIT					•	
		t	swear, or affirm, under pena rue and correct and includes Inder Title 15, Election Code	all information		
	Mr. Albert Hunter					or
	Signature of Campaign Treasurer					
AFFIX NOTARY STAMP / SEAL ABOVE						
				, this the		day
of	, 20, to certify v	vhich, witness r	ny hand and seal of office.			
Signature of officer ad	ninistering oath	Printed name c	of officer administering oath	Title	e of office	er administering oath
Forms provided by Texas E	thics Commission	www.e	ethics.state.tx.us			Version V3.5.1.5b35d027

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC

							Page 3 of 8
12 COMMITTEE NAME					1	L3 Filer ID	(Ethics Commission Filers)
Bosque Democratic Club						00070096	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ed Rick VonP	feil US Congres	ss 31		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	I				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	ed				
		B. Opposed	I				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supporte	ed Stuart Whi	tlow US Congre	ess 31		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	I				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	ed				
		B. Opposed	1				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						

FORM MPAC COVER SHEET PG 3

4 of 8

17 COMMITTEE NAME 18 Filer ID					(Ethics Commission Filers)		
Bosqu							
19 SCHED NAME		SUBTOTAL AMOUNT					
1. 🔉	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			\$	300.00		
2. >	х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00		
3. 🔉	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00		
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$			
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$			
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$			
7.	7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			\$			
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$				
9. 🔉	Х	SCHEDULE E: LOANS		\$	0.00		
10. 🔉	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	300.00		
11. 🔉	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00		
12. 🔉	12. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		\$	0.00			
13. 🔉	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00		
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$			
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$			
				•			

SUBTOTALS - MPAC

MONE	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Inst	ruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/8
2 FILER NAI Bosque D	/E emocratic Club	3 Filer ID (Ethics Commission Filers) 00070096
4 Date 02/18/202	6 Contributor address; City; State; Zip Code) 7 Amount of Contribution (\$) \$300.00
8 Principal o retired	Clifton, TX 76634-3933 ccupation / Job title (See Instructions) 9 Employer retired	r (See Instructions)

PLEDGED CONTRIBUTIONS	SCHEDULE B			
The Instruction Guide explains how to complete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 6/8			
2 FILER NAME Bosque Democratic Club	3 Filer ID (Ethics Commission Filers) 00070096			
⁴ TOTAL OF UNITEMIZED PLEDGES	\$ 0.00			
5 Date 6 Full name of pledgorout-of-state PAC (ID#:)	8 Amount of 9 In-kind description pledge (\$) (If applicable)			
7 Pledgor Address; City; State; Zip Code				
	Check if travel outside of Texas. Complete Schedule T.			
10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)	ictions)			

LOANS		SCHEI	DULE E
The Instruction Guide explains how to complete this form.	ages Schedule E: /1 Rpt: 7/8		
2 FILER NAME Bosque Democratic Club	3 Filer ID 000700		sion Filers)
⁴ TOTAL OF UNITEMIZED LOANS	•	\$	0.00
5 Date of loan 7 Name of lender out-of-state PAC (ID#:)	9 Loan Amount	(\$)
6 Is lender a 8 Lender address; City; State; Zip Code financial institution? institution?		10 Interest Rate11 Maturity Date	
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instruction)	s)		
14 Description of Collateral 15 Check if personal funds we None	ere deposite	d into political accor (See Instructio	
Instruction Instruction		19 Amount Guara	anteed (\$)
not applicable 18 Guarantor address; City; State; Zip Code			
20 Principal occupation 21 Employer (See Instruction)	s)		

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/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:					
Sch: 1/1 Rpt: 8/8	Bosque Democratic Club 00070096				
4 Date 02/18/2024	5 Payee name VonPfeil, Rick				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$100.00					
Expenditure from corporate funds	ТХ				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	\$100.00 Check if travel outside of Texas. Complete Schedule T.				
	Check if Austin, TX, officeholder living expense \$100.00 Donation to campaign				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
02/18/2024	Walbridge, Brain				
Amount (\$)	Payee address; City; State; Zip Code				
\$100.00					
Expenditure from corporate funds	ТХ				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) \$100.00 (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense \$100.00 Campaign donation				
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
02/18/2024	Whitlow, Stuart				
Amount (\$)	Payee address; City; State; Zip Code				
\$100.00					
Expenditure from corporate funds	ТХ				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	\$100.00 Check if travel outside of Texas. Complete Schedule T.				
	Check if Austin, TX, officeholder living expense \$100.00 Donation to campaign				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				