

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00066791	2 Total pages filed: 7				
3 COMMITTEE NAME Texas Democratic Veterans Caucus			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 06/01/2024 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged				
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP P.O. Box 2942 2300 Scenic Dr. Georgetown, TX 78628						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST John O.			MI MI		
	NICKNAME	LAST Applewhaite			SUFFIX		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3201 Broken Spoke Tr. Georgetown, TX 78628						
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3201 Broken Spoke Tr. Georgetown, TX 78628						
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(512)	863-9086					
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)						
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input checked="" type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5						
11 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	04	26	2024		05	25	2024

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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)	\$	133.00
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	\$	7,405.80
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	\$ 133.00
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	\$ 1,367.72
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: 4/7
2 FILER NAME Texas Democratic Veterans Caucus		3 Filer ID (Ethics Commission Filers) 00066791
4 Date 04/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Applewhaite, Jane	7 Amount of Contribution (\$) \$15.00
6 Contributor address; City; State; Zip Code Georgetown, TX 78628		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A
Date 05/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Applewhaite, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Georgetown, TX 78628		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 04/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knox, Ed	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code Abilene, TX 79602-4142		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 05/25/2024	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) Department of Defence
Date 05/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lepak, Michael	Amount of Contribution (\$) \$16.00
Contributor address; City; State; Zip Code San Angelo, TX 76903		
Principal occupation / Job title (See Instructions) Security		Employer (See Instructions) Allied universal

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/7
2 FILER NAME Texas Democratic Veterans Caucus		3 Filer ID (Ethics Commission Filers) 00066791
4 Date 05/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Douglas 6 Contributor address; City; State; Zip Code Dallas, TX 75208	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 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: 1/2 Rpt: 6/7	2 FILER NAME Texas Democratic Veterans Caucus	3 Filer ID (Ethics Commission Filers) 00066791
4 Date 05/25/2024	5 Payee name ActBlue LLC.	
6 Amount (\$) 3.32 <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.) Donation Fees
Date 05/20/2024	Payee name Designer Graphics	
Amount (\$) 157.42 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 12404 Hyw 55 S Tyler, TX 75703	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) 2024 Stare Democratic Convention
Date 05/17/2024	Payee name Designer Graphics	
Amount (\$) 1,106.69 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 12404 Hyw 55 S Tyler, TX 75703	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) 2024 Texas Democratic State Convention
Date 05/02/2024	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	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Cloud Storage

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/2 Rpt: 7/7	2 FILER NAME Texas Democratic Veterans Caucus	3 Filer ID (Ethics Commission Filers) 00066791
4 Date 05/10/2024	5 Payee name Mail Chimp	
6 Amount (\$) 28.25 <input type="checkbox"/> Expenditure from corporate funds	7 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) Solicitation/Fundraising Expense	(b) Description (See instructions regarding type of information required.) Mass Mailing
Date 05/06/2024	Payee name Uber	
Amount (\$) 27.27 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1725 3rd St San Francisco, TX 94158	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Ride Share	(b) Description (See instructions regarding type of information required.) Ride Share
Date 04/29/2024	Payee name Uber	
Amount (\$) 15.99 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1725 3rd St San Francisco, TX 94158	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Ride Share	(b) Description (See instructions regarding type of information required.) Ride Share
Date 04/29/2024	Payee name Uber	
Amount (\$) 15.99 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1725 3rd St San Francisco, TX 94158	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Ride Share	(b) Description (See instructions regarding type of information required.) Ride Share