

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

| | | | |
|---|--|--|-----------------------------------|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00082203 | 2 Total pages filed: 17 |
| 3 COMMITTEE NAME Bay Area Democratic Movement | | OFFICE USE ONLY | |
| | | Date Received ELECTRONICALLY FILED 07/01/2024 | |
| | | 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 CODE 3119 Fondren St La Porte, TX 77571 | | |
| | 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST Kathryn NICKNAME LAST Aguilar | MI SUFFIX |
| 6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small> | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3119 Fondren Street La Porte, TX 77571 | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3119 Fondren Street La Porte, TX 77571 | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (832) 906-0032 | | |
| 9 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff | | |
| 10 PERIOD COVERED | Month Day Year THROUGH Month Day Year 05/19/2024 06/30/2024 | | |
| 11 ELECTION | ELECTION DATE Month Day Year 05/28/2024 | ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | |

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

| | |
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| 12 COMMITTEE NAME Bay Area Democratic Movement | 13 Filer ID (Ethics Commission Filers) 00082203 |
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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 Judge Gemayel G. Haynes District Judge (Multi-county) |
| | | 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) | \$ 160.00 |
| | <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) | \$ 2,830.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 1,333.18 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 6,830.41 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 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.

Kathryn Aguilar

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 17

| | | | |
|--|---|--------------------------------|----------------------------|
| 17 COMMITTEE NAME Bay Area Democratic Movement | | 18 Filer ID 00082203 | (Ethics Commission Filers) |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ | 2,830.00 |
| 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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ | 1,333.18 |
| 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 | \$ | 53.51 |
| 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: 1/10 Rpt: 4/17 |
| 2 FILER NAME Bay Area Democratic Movement | | 3 Filer ID (Ethics Commission Filers) 00082203 |
| 4 Date 05/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adkison-Brown, Denise | 7 Amount of Contribution (\$) \$10.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77004 | |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) Law Offices of Denise Adkison-Brown PLLC |
| Date 06/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adkison-Brown, Denise | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77004 | |
| Principal occupation / Job title (See Instructions) Attorney | | Employer (See Instructions) Law Offices of Denise Adkison-Brown PLLC |
| Date 05/20/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alix, Sam | Amount of Contribution (\$) \$5.00 |
| | Contributor address; City; State; Zip Code Seabrook, TX 77586 | |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |
| Date 05/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berka, Angela (Ms.) | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77059 | |
| Principal occupation / Job title (See Instructions) unemployed | | Employer (See Instructions) none |
| Date 06/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berka, Angela (Ms.) | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77059 | |
| Principal occupation / Job title (See Instructions) unemployed | | Employer (See Instructions) none |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/10 Rpt: 5/17 |
| 2 FILER NAME Bay Area Democratic Movement | | 3 Filer ID (Ethics Commission Filers) 00082203 |
| 4 Date 06/28/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blog J.D., Thomas <hr/> 6 Contributor address; City; State; Zip Code Santa Fe, NM 87506 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) Lawyer | | 9 Employer (See Instructions) Digital Forensics |
| Date 06/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BoozeL, Julie <hr/> Contributor address; City; State; Zip Code Bacliff, TX 77518 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Sales Executive | | Employer (See Instructions) CVS Health |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyd J.D., Amber <hr/> Contributor address; City; State; Zip Code Houston, TX 77003 | Amount of Contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) self |
| Date 06/04/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Leti <hr/> Contributor address; City; State; Zip Code Houston, TX 77062 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Product Analyst | | Employer (See Instructions) LivaNova |
| Date 06/18/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobarruvias, John <hr/> Contributor address; City; State; Zip Code Houston, TX 77062 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) Retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/10 Rpt: 6/17 |
| 2 FILER NAME Bay Area Democratic Movement | | 3 Filer ID (Ethics Commission Filers) 00082203 |
| 4 Date 06/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coutrado, Linda | 7 Amount of Contribution (\$) \$10.00 |
| | 6 Contributor address; City; State; Zip Code League City, TX 77573 | |
| 8 Principal occupation / Job title (See Instructions) Legal Secretary | | 9 Employer (See Instructions) Hebinck & Alter |
| Date 06/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feustel, Indira | Amount of Contribution (\$) \$35.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77059 | |
| Principal occupation / Job title (See Instructions) Speech Therapist | | Employer (See Instructions) Spacecom LLC |
| Date 06/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forienza, Nelly | Amount of Contribution (\$) \$35.00 |
| | Contributor address; City; State; Zip Code Seabrook, TX 77586 | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) none |
| Date 06/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frame, William | Amount of Contribution (\$) \$10.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77034 | |
| Principal occupation / Job title (See Instructions) Not Employed | | Employer (See Instructions) Not Employed |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein J.D., Bonnie (Judge) | Amount of Contribution (\$) \$150.00 |
| | Contributor address; City; State; Zip Code Dallas, TX 75214 | |
| Principal occupation / Job title (See Instructions) Justice | | Employer (See Instructions) State of Texas |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/10 Rpt: 7/17 |
| 2 FILER NAME Bay Area Democratic Movement | | 3 Filer ID (Ethics Commission Filers) 00082203 |
| 4 Date 06/25/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammond, Ann | 7 Amount of Contribution (\$) \$250.00 |
| 6 Contributor address; City; State; Zip Code Houston, TX 77062 | | |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) retired |
| Date 06/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hightower, Richard (Judge) | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Houston, TX 77025 | | |
| Principal occupation / Job title (See Instructions) Judge | | Employer (See Instructions) Texas |
| Date 06/16/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Jane | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Houston, TX 77062 | | |
| Principal occupation / Job title (See Instructions) Dance Teacher | | Employer (See Instructions) JRSOD |
| Date 06/02/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Nancy | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Houston, TX 77062 | | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 06/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Nancy M (Mrs.) | Amount of Contribution (\$) \$300.00 |
| Contributor address; City; State; Zip Code Spring, TX 77382 | | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) none |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/10 Rpt: 8/17 |
| 2 FILER NAME Bay Area Democratic Movement | | 3 Filer ID (Ethics Commission Filers) 00082203 |
| 4 Date 06/06/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaus, Nancy | 7 Amount of Contribution (\$) \$20.00 |
| 6 Contributor address; City; State; Zip Code Houston, TX 77059 | | |
| 8 Principal occupation / Job title (See Instructions) Dental Hygienist | | 9 Employer (See Instructions) Designer Smiles |
| Date 06/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Landau J.D., Sarah Beth | Amount of Contribution (\$) \$150.00 |
| Contributor address; City; State; Zip Code Houston, TX 77009 | | |
| Principal occupation / Job title (See Instructions) Assistant Public Defender | | Employer (See Instructions) Harris County |
| Date 06/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Tracey | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Seabrook, TX 77586 | | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 06/27/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Grant | Amount of Contribution (\$) \$150.00 |
| Contributor address; City; State; Zip Code San Francisco, CA 94115 | | |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) self |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayes Guice J.D., Ashley | Amount of Contribution (\$) \$150.00 |
| Contributor address; City; State; Zip Code Humble, TX 77396 | | |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) Candidate for Campaign of Ashley Mayes Guice |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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|--|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/10 Rpt: 9/17 |
| 2 FILER NAME Bay Area Democratic Movement | | 3 Filer ID (Ethics Commission Filers) 00082203 |
| 4 Date 06/27/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Menefee J.D., Christian (The Honorable) | 7 Amount of Contribution (\$) \$150.00 |
| | 6 Contributor address; City; State; Zip Code Houston, TX 77004 | |
| 8 Principal occupation / Job title (See Instructions) Attorney | | 9 Employer (See Instructions) City of Houston |
| Date 06/25/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miles, Arlis | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77058 | |
| Principal occupation / Job title (See Instructions) unemployed | | Employer (See Instructions) unemployed |
| Date 06/13/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neckelmann, Shawn | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77062-5914 | |
| Principal occupation / Job title (See Instructions) SW Developer | | Employer (See Instructions) Universal Weather & Aviation |
| Date 05/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onorato, Michelle (Dr.) | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77062 | |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) self |
| Date 06/30/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onorato, Michelle (Dr.) | Amount of Contribution (\$) \$25.00 |
| | Contributor address; City; State; Zip Code Houston, TX 77062 | |
| Principal occupation / Job title (See Instructions) Physician | | Employer (See Instructions) self |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/10 Rpt: 10/17 |
| 2 FILER NAME Bay Area Democratic Movement | | 3 Filer ID (Ethics Commission Filers) 00082203 |
| 4 Date 06/16/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborne, Dylan | 7 Amount of Contribution (\$) \$15.00 |
| 6 Contributor address; City; State; Zip Code Houston, TX 77006 | | |
| 8 Principal occupation / Job title (See Instructions) Treasurer | | 9 Employer (See Instructions) Harris County |
| Date 05/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Rebecca | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Houston, TX 77062 | | |
| Principal occupation / Job title (See Instructions) Book seller | | Employer (See Instructions) Freeman Library |
| Date 06/21/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Rebecca | Amount of Contribution (\$) \$10.00 |
| Contributor address; City; State; Zip Code Houston, TX 77062 | | |
| Principal occupation / Job title (See Instructions) Book seller | | Employer (See Instructions) Freeman Library |
| Date 06/10/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinkerton, Susan | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Houston, TX 77058 | | |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) none |
| Date 06/01/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin | Amount of Contribution (\$) \$25.00 |
| Contributor address; City; State; Zip Code Houston, TX 77062 | | |
| Principal occupation / Job title (See Instructions) Statistician | | Employer (See Instructions) Aerodyne Industries |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/10 Rpt: 11/17 |
| 2 FILER NAME Bay Area Democratic Movement | | 3 Filer ID (Ethics Commission Filers) 00082203 |
| 4 Date 06/08/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts Penwright, Marci <hr/> 6 Contributor address; City; State; Zip Code Tulsa, OK 74102 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) none |
| Date 06/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rokes, Susan <hr/> Contributor address; City; State; Zip Code Santa Fe, TX 77517 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) Fort Bend |
| Date 06/11/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sendejo, Martha <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546 | Amount of Contribution (\$) \$35.00 |
| Principal occupation / Job title (See Instructions) Educator | | Employer (See Instructions) Bacado |
| Date 05/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simoneaux, Jerry (Judge) <hr/> Contributor address; City; State; Zip Code Seabrook, TX 77586-0942 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Judge | | Employer (See Instructions) Harris County |
| Date 06/23/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simoneaux, Jerry (Judge) <hr/> Contributor address; City; State; Zip Code Seabrook, TX 77586-0942 | Amount of Contribution (\$) \$20.00 |
| Principal occupation / Job title (See Instructions) Judge | | Employer (See Instructions) Harris County |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/10 Rpt: 12/17 |
| 2 FILER NAME Bay Area Democratic Movement | | 3 Filer ID (Ethics Commission Filers) 00082203 |
| 4 Date 06/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singh, Pomila <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77059 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) Professor | | 9 Employer (See Instructions) UTMB |
| Date 06/12/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Elwood <hr/> Contributor address; City; State; Zip Code El Lago, TX 77586 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) none |
| Date 06/03/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stalder, Barbara (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77089 | Amount of Contribution (\$) \$15.00 |
| Principal occupation / Job title (See Instructions) Judge | | Employer (See Instructions) State of Texas |
| Date 05/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandagriff, Judy <hr/> Contributor address; City; State; Zip Code Houston, TX 77062 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |
| Date 06/28/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandagriff, Judy <hr/> Contributor address; City; State; Zip Code Houston, TX 77062 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) retired | | Employer (See Instructions) retired |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/10 Rpt: 13/17 |
| 2 FILER NAME Bay Area Democratic Movement | | 3 Filer ID (Ethics Commission Filers) 00082203 |
| 4 Date 06/11/2024 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weldon Mitchum, Katherine <hr/> 6 Contributor address; City; State; Zip Code Deer Park, TX 77536 | 7 Amount of Contribution (\$) \$290.00 |
| 8 Principal occupation / Job title (See Instructions) retired | | 9 Employer (See Instructions) none |
| Date 05/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Adam (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77062 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Maintenance | | Employer (See Instructions) Baywind Village Skilled Nursing |
| Date 06/24/2024 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Adam (Mr.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77062 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) Maintenance | | Employer (See Instructions) Baywind Village Skilled Nursing |

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 1/3 Rpt: 14/17 | 2 FILER NAME Bay Area Democratic Movement | 3 Filer ID (Ethics Commission Filers) 00082203 |
|--|---|--|

| | |
|-----------------------------|---------------------------------|
| 4 Date 06/30/2024 | 5 Payee name Act Blue |
|-----------------------------|---------------------------------|

| | |
|--|--|
| 6 Amount (\$) \$88.66 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144 |
|--|--|

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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees for contribution processing |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 06/10/2024 | Payee name CW Design |
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| Amount (\$) \$300.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 840 Handsworth Ln Apt 8 Raleigh, NC 27607 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Bay Area Democrat Flyer design | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Design of flyer |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 06/11/2024 | Payee name Lucien's Caribbean Grill |
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| Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1035 Clear Lake City Blvd. Houston , TX 77062 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for June 11 Meeting |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 2/3 Rpt: 15/17 | 2 FILER NAME Bay Area Democratic Movement | 3 Filer ID (Ethics Commission Filers) 00082203 |
| 4 Date 06/06/2024 | 5 Payee name Moulte, Pete (Mr.) | |
| 6 Amount (\$) \$90.42 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 18507 Barbuda Ln Houston, TX 77058 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paper products for meeting meal service |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/12/2024 | Candidate/Officeholder name Office sought Office held | |
| Payee name Simpletexting Co | | |
| Amount (\$) \$163.16 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1815 Purdy Ave Miami Beach, FL 33139 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Group Texting related App | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting related App annual fee group texting |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/12/2024 | Candidate/Officeholder name Office sought Office held | |
| Payee name Simpletexting Co | | |
| Amount (\$) \$470.11 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1815 Purdy Ave Miami Beach, FL 33139 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Group Texting App | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting app annual fee Group texting |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 06/12/2024 | Candidate/Officeholder name Office sought Office held | |
| Payee name Simpletexting Co | | |
| Amount (\$) \$470.11 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 1815 Purdy Ave Miami Beach, FL 33139 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Group Texting App | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting app annual fee Group texting |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule F1: Sch: 3/3 Rpt: 16/17 | 2 FILER NAME Bay Area Democratic Movement | 3 Filer ID (Ethics Commission Filers) 00082203 |
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| 4 Date 06/11/2024 | 5 Payee name Square, Inc. |
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| 6 Amount (\$) \$3.78 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 1455 Market Street, Suite 600 San Francisco, CA 94103 |
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| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee for use of Credit card for donations |
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| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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| Date 06/10/2024 | Payee name Zoom |
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| Amount (\$) \$17.05 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 55 Almaden Blvd 6th Floor San Jose, CA 95113 |
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| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Video meeting company | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly fee for video meetings |
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| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

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| 1 Total pages Schedule I: Sch: 1/1 Rpt: | 2 FILER NAME Bay Area Democratic Movement | 3 Filer ID (Ethics Commission Filers) 00082203 |
| 4 Date 05/20/2024 | 5 Payee name Hunsa Thai Kitchen | |
| 6 Amount (\$) 53.51 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee Address; City; State; Zip 4622 E NASA Pkwy Seabrook , TX 77571 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense | (b) Description (See instructions regarding type of information required.) Gift for sick member Don Hill |