

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 06/28/2024
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		
Date Hand-delivered or Date Postmarked			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mr.	John O.	
	NICKNAME	LAST	SUFFIX
	Applewhaite		
Date Processed			
Date Imaged			
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 checked="" 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 type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5		
11 PERIOD COVERED	Month	Day	Year
	05/26	2024	THROUGH
	06/25	2024	
GO TO PAGE 2			

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)	\$ 202.00
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	\$ 6,970.27
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 00066791	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS			SUBTOTAL AMOUNT
	NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	202.00
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	\$	374.23
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 06/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Applewhiaite, John	7 Amount of Contribution (\$) \$40.00
	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 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kohlwes, Jeremy	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code San Antonio, TX 78253	
Principal occupation / Job title (See Instructions) Analytics Consultant		Employer (See Instructions) Wells Fargo
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luckens, Ben	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Austin, TX 78731	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luckens, Ben	Amount of Contribution (\$) \$16.00
	Contributor address; City; State; Zip Code Austin, TX 78731	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luis, Cas	Amount of Contribution (\$) \$16.00
	Contributor address; City; State; Zip Code Galveston, TX 77551	
Principal occupation / Job title (See Instructions) R.N.		Employer (See Instructions) Houston Methodist Hospital

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 06/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, William <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 74602	7 Amount of Contribution (\$) \$16.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Owsley, James <hr/> Contributor address; City; State; Zip Code Greenville, TX 75402	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Adjunct		Employer (See Instructions) Paris JuniorCollege
Date 06/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torres, Richard <hr/> Contributor address; City; State; Zip Code Pflugville, TX 78660	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vargas, John <hr/> Contributor address; City; State; Zip Code Laredo, TX 78041	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Verrett, Lianna <hr/> Contributor address; City; State; Zip Code El Paso, TX 79912	Amount of Contribution (\$) \$16.00
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: 1/2 Rpt: 6/7		2 FILER NAME Texas Democratic Veterans Caucus		3 Filer ID (Ethics Commission Filers) 00066791	
4 Date 06/23/2024		5 Payee name ActBlue LLC.			
6 Amount (\$) 8.05 <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 06/03/2024		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) Cloud Drive		(b) Description (See instructions regarding type of information required.) Cloud Drive Storage	
Date 06/10/2024		Payee name Hotel Indigo El Paso Downtown, an IHG Hotel			
Amount (\$) 270.72 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 325 N Kansas St El Paso, TX 79901			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense		(b) Description (See instructions regarding type of information required.) TDV Convention Get-to-Gather	
Date 06/10/2024		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			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Mass Mail		(b) Description (See instructions regarding type of information required.) Mass Mailing Servicer	

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 06/06/2024	5 Payee name Office Depot	
6 Amount (\$) 39.92 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1550 Lionel Dr El Paso, TX 79936	
8 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.) Money bag for Convention sales.
Date 06/10/2024	Payee name Square	
Amount (\$) 12.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1455 Market Street Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fees
Date 06/06/2024	Payee name Wells Fargo ATM	
Amount (\$) 2.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 9411 Alameda Ave El Paso, TX 79907	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) ATM Fee.