SPECIFIC-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT

FORM **SPAC**
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.	**1** Filer ID (Ethics Commission Filers) 00016469	**2** Total pages filed: 8

3 COMMITTEE NAME

Fraser for Texas Senate

4 COMMITTEE ADDRESS

☐ Change of Address

ADDRESS / PO BOX;   APT / SUITE #;   CITY;   STATE;   ZIP CODE

P.O. Box 8830

Horseshoe Bay, TX 78657

5 CAMPAIGN TREASURER NAME

MS / MRS / MR   FIRST   MI

Ms.   Dian

NICKNAME   LAST   SUFFIX

Owen-Stai

6 CAMPAIGN TREASURER STREET ADDRESS

(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE);   APT / SUITE #;   CITY;   STATE;   ZIP CODE

P.O. Box 8830

Horseshoe Bay, TX 78657

7 CAMPAIGN TREASURER MAILING ADDRESS

☐ Change of Address

STREET OR PO BOX;   APT / SUITE #;   CITY;   STATE;   ZIP CODE

P.O. Box 8830

Horseshoe Bay, TX 78657

8 CAMPAIGN TREASURER PHONE

AREA CODE   PHONE NUMBER   EXTENSION

(512) 426-0557

9 REPORT TYPE

☐ January 15   ☐ 30th day before election   ☐ Exceeded modified reporting limit

☐ 8th day before election   ☒ Dissolution (Attach PAC-DR)

☒ July 15   ☐ Runoff   ☐ 10th day after campaign treasurer termination

10 PERIOD COVERED

Month   Day   Year   Month   Day   Year

01/01/2024   THROUGH   06/30/2024

11 ELECTION

ELECTION DATE   ELECTION TYPE
Month   Day   Year

☐ Primary   ☐ Runoff   ☐ Other

☐ General   ☐ Special

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SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC
COVER SHEET PG 2

12 COMMITTEE NAME	**13** Filer ID	(Ethics Commission Filers)
Fraser for Texas Senate	00016469	

14 COMMITTEE PURPOSE

(Attach lists on plain paper to complete this report if necessary.)

☐ SUPPORT
(Candidate or Measure)

☐ OPPOSE
(Candidate or Measure)

☐ ASSIST
(Officeholder)

☐ Candidate
☐ Officeholder

CANDIDATE / OFFICEHOLDER NAME

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)

☐ Measure

BALLOT IDENTIFICATION / #

ELECTION DATE
Month   Day   Year

DESCRIPTION

15 CONTRIBUTION TOTALS	**1.** TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED	$	$0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$	$0.00
EXPENDITURE TOTALS	**3.** TOTAL UNITEMIZED POLITICAL EXPENDITURES	$	$0.00
	4. TOTAL POLITICAL EXPENDITURES	$	$51,501.28
CONTRIBUTION BALANCE	**5.** TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$	$0.00
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.

Ms. Dian Owen-Stai
_____
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

17 COMMITTEE NAME	**18** Filer ID	(Ethics Commission Filers)
Fraser for Texas Senate	00016469	

19 SCHEDULE SUBTOTALS

NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. ☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 0.00
2. ☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$ 0.00
3. ☒ SCHEDULE B: PLEDGED CONTRIBUTIONS	$ 0.00
4. ☐ SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
5. ☐ SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
6. ☐ SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
7. ☒ SCHEDULE E: LOANS	$ 0.00
8. ☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$ 51,501.28
9. ☒ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$ 0.00
10. ☒ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	$ 0.00
11. ☒ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$ 0.00
12. ☐ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	$
13. ☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$
14. ☒ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$ 87.01

PLEDGED CONTRIBUTIONS

The Instruction Guide explains how to complete this form.	**1** Total pages Schedule B: Sch: 1/1 Rpt: 4/8

2 FILER NAME Fraser for Texas Senate	**3** Filer ID (Ethics Commission Filers) 00016469

4 TOTAL OF UNITEMIZED PLEDGES	**$** 0.00

5 Date	**6** Full name of pledgor ☐ out-of-state PAC (ID#:_____) .... **7** Pledgor Address; City; State; Zip Code	**8** Amount of pledge ($)	**9** In-kind description (If applicable)
			☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)	**11** Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

Sch: 1/1 Rpt: 5/8

2 FILER NAME

Fraser for Texas Senate

3 Filer ID (Ethics Commission Filers)

00016469

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 financial institution?

8 Lender address;   City;   State;   Zip Code

10 Interest Rate

11 Maturity Date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☐ None

15 Check if personal funds were deposited into political account

(See Instructions)

☐

16 GUARANTOR INFORMATION

☐ not applicable

17 Name of guarantor

18 Guarantor address;   City;   State;   Zip Code

19 Amount Guaranteed ($)

20 Principal occupation

21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE **F1**

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 6/8	Fraser for Texas Senate	00016469

4 Date	5 Payee name
06/28/2024	Lake Area Storage

6 Amount ($)	7 Payee address; City; State; Zip Code
$1,501.28	203 RR 2831
☐ Expenditure from corporate funds	Horseshoe Bay, TX 78657

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed at the top of this schedule)
Office Overhead/Rental Expense

(b) Description
☐ Check if travel outside of Texas. Complete Schedule T.
☐ Check if Austin, TX, officeholder living expense
Storage

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH   Candidate/Officeholder name   Office sought   Office held

Date	Payee name
04/29/2024	Texas Scottish Rite Hospital for Children

Amount ($)	Payee address; City; State; Zip Code
$50,000.00	2222 Welborn Street
☐ Expenditure from corporate funds	Dallas, TX 75219

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
Charitable Contributions

Complete <u>ONLY</u> if direct expenditure to benefit C/OH   Candidate/Officeholder name   Office sought   Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 7/8

2 FILER NAME	**3** Filer ID (Ethics Commission Filers)
Fraser for Texas Senate	00016469

4 Date	**5** Name of person from whom amount is received	**8** Amount ($)
06/30/2024	Cadence Bank	$87.01
	6 Address of person from whom amount is received; City; State; Zip Code	
	Horseshoe Bay, TX 78657	
	7 Purpose for which amount is received ☐ Check if political contribution returned to filer	
	Interest	

POLITICAL COMMITTEE
AFFIDAVIT OF DISSOLUTION

The Instruction Guide explains how to complete this form. **Complete only if "Report Type" on page 1 is marked "Dissolution" **

1 COMMITTEE NAME	**2** Filer ID (Ethics Commission Filers)
Fraser for Texas Senate	00016469

3 Affidavit of Dissolution

I, the undersigned campaign treasurer, do not expect the occurrence of any further reportable activity by this political committee for this or any other campaign or election for which reporting under the Election Code is required. I declare that all of the information required to be reported by me has been reported. I understand that designating a report as a dissolution report terminates the appointment of campaign treasurer. I further understand that a political committee may not make or authorize political expenditures or accept political contributions without having an appointment of campaign treasurer on file.

Ms. Dian Owen-Stai
_____
Signature of Campaign Treasurer

DO NOT SIGN UNLESS POLITICAL COMMITTEE IS TO BE DISSOLVED

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