#### FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00040978 3 COMMITTEE NAME **OFFICE USE ONLY** Capital Area Progressive Democrats Date Received **ELECTRONICALLY FILED** 07/14/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 413 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78767 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Allison G. NAME NICKNAME LAST **SUFFIX** Heinrich STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2301 Ohlen Rd. #107 STREET **ADDRESS** (Residence or Business) Austin, TX 78757 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2301 Ohlen Rd. #107 MAILING **ADDRESS** Austin, TX 78757 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 297-1650 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 02/25/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Capital Area Progress	sive Democrats		00040978	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Jett Hanna Travis Central Appr	raisal District E	soard of Directors
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	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	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)  qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,021.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	3,685.67
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	7,512.73
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT	<u> </u>		·	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Allison G.	Heinrich	
		Signature of Car	npaign Treasure	r
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said	, th	nis the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of office	r administering oath

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

### FORM GPAC ADDENDUM

Page 3 of 15

					1 ago o o 1 10			
12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)			
	Capital Area Progressiv	e Democrats			00040978			
14	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Shenghao "Daniel" Weng Travis Directors	vis Central Appraisal District Board of			
	(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					
			B. Opposed					
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
	COMMITTEE	1. Candidates	A. Supported	Dick Lavine Travis Central Appr	aisal District Board of Directors			
	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					
			B. Opposed					
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
	COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)	A. Supported	The Honorable Lloyd Doggett U	.S. Representative, District 37			
	(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					
			B. Opposed		<del></del>			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
		1 , , , , , , , , , , , , , , , , ,	l					

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

### FORM GPAC ADDENDUM

Page 4 of 15

12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	Capital Area Progressiv	e Democrats			00040978
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Karin Crump Co	urt Of Appeals, Justice
	(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		
			B. Opposed		
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)	A. Supported	The Honorable James Talarico	State Representative
	(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		
			B. Opposed		
		Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)			
	COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Sherrine Thomas District Judge	
	(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		
			B. Opposed		
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			

#### **GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE**

### FORM GPAC **ADDENDUM**

						Page 5 01 15
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Capital Area Progressiv	e Democrats				0004097	'8
14 COMMITTEE ACTIVITY	Candidates  (Identify by name or, if applicable, classify by party.)		The Honorable	Jose Garza Dist	rict Attorney	
(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				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Ornela Deseta	Travis County Ju	ustice of the I	Peace, Pct 5
(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				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

### **SUBTOTALS - GPAC**

## FORM **GPAC**COVER SHEET PG 3

					6 of 15
<b>17</b> CON	имітте	E NAME	18 Filer ID	(Ethics Commiss	sion Filers)
Can	ital Ar	ea Progressive Democrats	00040978	•	,
		E SUBTOTALS		Τ	
		SCHEDULE		SUBTOTA	L AMOUNT
INAIV		SCHEDOLL		<del> </del>	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,021.00
2.		\$			
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION				
9.	9. SCHEDULE E: LOANS				
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	3,685.67
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	2.83

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 7/15
2	FILER NAME Capital Area Progressive Democrats	3 Filer ID (Ethics Commission Filers) 00040978
4	Date 06/10/2024  5 Full name of contributor out-of-state PAC (ID#:  Gerson, Lora Ann & Steve  6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$21.0
	Austin, TX 78731	
8	Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  N/A	ructions)
	Date Full name of contributor out-of-state PAC (ID#:	) Amount of Contribution (\$) \$1,000.0
	Austin, TX 78751	
	Principal occupation / Job title (See Instructions)  Employer (See Instructions)	ructions)

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal Oakarlaia 54	
1 Total pages Schedule F1:	
Sch: 1/7 Rpt: 8/15	Capital Area Progressive Democrats 00040978
4 Date	5 Payee name
06/16/2024	ActBlue
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$40.33	P.O. Box 441156
* ******	
Expenditure from	Comparille MA 02144
corporate funds	Somerville, MA 02144
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Credit card processing fees
	Credit card processing rees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
experialitare to benefit 6/61	•
Date	Payee name
05/07/2024	BookPeople
Amount (\$)	Payee address; City; State; Zip Code
\$105.41	603 N Lamar Blvd
,	
Expenditure from	Austin TV 70702
corporate funds	Austin, TX 78703
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Meeting door prizes
	Wiceling door prizes
0 1: 01111/1/1/1	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiance to serious eye.	
Date	Payee name
03/01/2024	Capitol Credit Union
Amount (\$)	Payee address; City; State; Zip Code
\$3.99	P.O. Box 81649
Expenditure from	Austin TV 70700
corporate funds	Austin, TX 78708
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Bank fees
	Dalik ices
Operation Children	Out like to 100 and the transport of the second to 100 and the transport of the transport o
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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)

Credit Card Payment	The Instruction Guide explains how to c	omplete this	s form.			
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission File	ers)	
Sch: 2/7 Rpt: 9/15	Capital Area Progressive Democrats			00040978		
4 Date	5 Payee name		•			
04/02/2024	Capitol Credit Union					
6 Amount (\$)	7 Payee address; City; State; Zip C	ode				
\$3.99	P.O. Box 81649					
Expenditure from corporate funds	Austin, TX 78708					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Desc	ription			
OF EXPENDITURE	Accounting/Banking				nplete Schedule T.	
			neck if Austin, TX K <b>fees</b>	, officeholder living	g expense	
		Daili	K IEES			
O Complete ONLY if direct	Condidate/Officeholder name			Office h	ald	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ugnı		Office h	eid	
Date	Payee name					
05/01/2024	Capitol Credit Union					
Amount (\$)	Payee address; City; State; Zip C	ode				
\$3.99	P.O. Box 81649					
- Evanaditura from						
Expenditure from corporate funds	Austin, TX 78708					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Desc	ription			
OF EXPENDITURE	Accounting/Banking	· —	•	ide of Texas. Com	nplete Schedule T.	
EXPENDITORE				, officeholder living	g expense	
		Bank	k fees			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught		Office h	eld	
experientare to benefit Great						
Date	Payee name					
06/03/2024	Capitol Credit Union					
Amount (\$)	Payee address; City; State; Zip C	ode				
\$3.99	P.O. Box 81649					
Expenditure from corporate funds	Austin, TX 78708					
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Desc	rintion			
OF	Accounting/Banking	· —		ide of Texas. Com	nplete Schedule T.	
EXPENDITURE		Cr	neck if Austin, TX	, officeholder living	g expense	
		Bank	k fees			
Complete ONLY if direct	Candidate/Officeholder name Office so	ught		Office h	eld	
expenditure to benefit C/OI	1					

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 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)

Credit Card Payment  The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F1:	2 FILER NAME	(Ethics Commission File	ers)					
Sch: 3/7 Rpt: 10/15	Capital Area Progressive Democrats	Capital Area Progressive Democrats 00040978						
4 Date	5 Payee name		<u> </u>					
05/01/2024	Elementor							
6 Amount (\$)	7 Payee address; City; State; Zip C	Code						
\$191.75	Tuval Street 40							
Expenditure from corporate funds	Ramat Gan 5252247 Israel							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Des	scription					
OF EXPENDITURE	Advertising Expense		Check if travel outsid					
			Check if Austin, TX,	officenolder living	g expense			
		"	boile					
9 Complete ONLY if direct	Candidate/Officeholder name Office so	l waht		Office he	old			
expenditure to benefit C/O		ougrit		Office fi	eiu			
Date	Payee name							
05/07/2024	First United Methodist Church							
Amount (\$)	Payee address; City; State; Zip C	Code						
\$375.00	1201 Lavaca St							
Expenditure from								
corporate funds	Austin, TX 78701							
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Des	scription					
OF EXPENDITURE	Event Expense		Check if travel outsic					
EXI ENDITORE			Check if Austin, TX,		g expense			
		Me	eting space re	entai				
0 1 0 0 1 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0		<u> </u>		0" 1				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ought		Office h	eld			
Date	Payee name							
03/03/2024	Google LLC							
Amount (\$)	Payee address; City; State; Zip C	ode						
\$6.40	1600 Amphitheatre Pkwy							
— Forest diture from								
Expenditure from corporate funds	Mountain View, CA 94043							
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Des	scription					
OF	Office Overhead/Rental Expense	· —	Check if travel outsion	de of Texas. Com	plete Schedule T.			
EXPENDITURE	·		Check if Austin, TX,	officeholder living	g expense			
		GS	uite					
		<u></u>						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ought		Office h	eld			
experience to belieff 6/01	•							

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	I 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/7 Rpt: 11/15	Capital Area Progressive Democrats 00040978
4 Date	5 Payee name
04/02/2024	Google LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$6.63	1600 Amphitheatre Pkwy
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense  GSuite
	Gouile
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experience to serious eye	
Date	Payee name
05/02/2024	Google LLC
Amount (\$)	Payee address; City; State; Zip Code
\$7.68	1600 Amphitheatre Pkwy
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense  GSuite
	GSuite
Operation ONLY if discont	Our did to 10 ff as had done as many
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
06/02/2024	Google LLC
Amount (\$)	Payee address; City; State; Zip Code
\$7.68	1600 Amphitheatre Pkwy
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	GSuite
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/O	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 5/7 Rpt: 12/15	Capital Area Progressive Democrats 00040978
4 Date	5 Payee name
05/07/2024	Half Price Books
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$83.83	5555 N. Lamar
	Ste. B-105
Expenditure from corporate funds	Austin, TX 78751
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Gift/Awards/Memorials Expense
-	Check if Austin, TX, officeholder living expense
	Meeting door prizes
O Commission ONLY if alimost	Constitute / Office helder mores Office accords
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
Date	Payee name
03/25/2024	Jetta Hanna for Appraisal District Board
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	6112 Highlandale Dr
Ψ±,500.00	1112 Highliandaic Di
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
Date	Payee name
03/01/2024	The Austin Chronicle
Amount (\$)	Payee address; City; State; Zip Code
\$1,345.00	P.O. Box 4189
Φ1,345.00	F.O. BOX 4109
Expenditure from corporate funds	Austin, TX 78765
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Endorsement ads
0 1 0 0 1 0 0 1 0 0 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Doggett, Lloyd (The Honorable) U.S. Representative, District 37 U.S. Representative, District 37

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Polling Expense Travel in D
Printing Expense Travel Out
Salaries/Wages/Contract Labor OTHER (e

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

Credit Card	d Payment	The Instru	uction Guide explains how to	complete this form.		
	es Schedule F1: 7 Rpt: 13/15	FILER NAME     Capital Area Progres	ssive Democrats	3	Filer ID (I	Ethics Commission Filers)
4 Date		5 Payee name (see previous)				
6 Amount (\$	\$)	<b>7</b> Payee address; Cit	ty; State; Zip	Code		
Expenditu corporate	e funds					
8 PURP OI EXPEND	F	(a) Category (See Categories	s listed at the top of this schedule)		ide of Texas. Complet	
	ONLY if direct re to benefit C/O	Candidate/Officeholder r Crump, Karin (The Ho		ought Of Appeals, Justice Pla	Office held ace District Ju	dge District 250th
Date		Payee name (see previous)				
Amount (\$	ure from	Payee address; Cit	ty; State; Zip	Code		
PURP OI EXPEND	F	(a) Category (See Categories	s listed at the top of this schedule)	<b> </b>	ide of Texas. Complet , officeholder living ex	
	ONLY if direct ire to benefit C/O	Candidate/Officeholder r Talarico, James (The		ought Representative District	Office held 50 State Rep	resentative District 50
Date		Payee name (see previous)				
Amount (\$		Payee address; Cit	ty; State; Zip	Code		
Expenditu corporate						
PURP OI EXPEND	F	(a) Category (See Categories	s listed at the top of this schedule)		ide of Texas. Complet , officeholder living ex	
	ONLY if direct re to benefit C/O	Candidate/Officeholder r Thomas, Sherinne		ought Judge District 353rd	Office held	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to com	plete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 7/7 Rpt: 14/15	Capital Area Progressive Democrats	00040978
4 Date	5 Payee name	·
	(see previous)	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/OH Jose, Garza (The Honorable) District Attorney District 53rd District Attorney District 53rd		
Date	Payee name	
	(see previous)	
Amount (\$)	Payee address; City; State; Zip Code	
Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder name Office sough	nt Office held
expenditure to benefit C/OH Deseta, Ornela Travis County Justice of the		

#### INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 15/15 2 FILER NAME Filer ID (Ethics Commission Filers) Capital Area Progressive Democrats 00040978 8 Amount (\$) Date 5 Name of person from whom amount is received 03/01/2024 Capitol Credit Union \$0.88 6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78708 Purpose for which amount is received Check if political contribution returned to filer Interest Amount (\$) Date Name of person from whom amount is received 04/01/2024 Capitol Credit Union \$0.75 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78708 Purpose for which amount is received Check if political contribution returned to filer Interest Date Name of person from whom amount is received Amount (\$) 05/01/2024 Capitol Credit Union \$0.62 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78708 Purpose for which amount is received Check if political contribution returned to filer Interest

Date

06/01/2024

Name of person from whom amount is received

Purpose for which amount is received

Address of person from whom amount is received; City; State; Zip Code

Capitol Credit Union

Austin, TX 78708

Interest

Amount (\$)

Check if political contribution returned to filer

\$0.58