#### FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00088690 3 COMMITTEE NAME **OFFICE USE ONLY CROPS** Date Received **ELECTRONICALLY FILED** 07/02/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 941 Date Hand-delivered or Date Postmarked Change of Address Clarendon, TX 79226 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Chrisi NAME NICKNAME LAST **SUFFIX** Tucek STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4501 CR 13 STREET **ADDRESS** (Residence or Business) Clarendon, TX 79226 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 941 MAILING **ADDRESS** Clarendon, TX 79226 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (806) 336-3740 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election X July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Year Month Day Year Month Day COVERED 04/25/2024 **THROUGH** 07/02/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Other Runoff 05/04/2024 χ General Special

### SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

## FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Con	mission Filers)
CROPS			00088690		
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME			
(Attach lists on plain paper to complete this	Candidate				
report if necessary.)	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HEL	D (officeholder)		
X SUPPORT					
(Candidate or Measure)		BALLOT IDENTIFICATION / #	ELECTI	ION DATE	
OPPOSE			Month	Day	Year
(Candidate or Measure)			05/04/2	2024	
ASSIST	X Measure				
(Officeholder)		DESCRIPTION			
,		school bond election			
15 CONTRIBUTION TOTALS		TRIBUTIONS OF \$50 OR LESS (OTHER THA EES OF LOANS, OR CONTRIBUTIONS MADE ILESS ITEMIZED	N PLEDGES,	\$	\$0.00
	2. TOTAL POLITICAL C	ONTRIBUTIONS			
	(OTHER THAN PLEDGE	S, LOANS, OR GUARANTEES OF LOANS)		\$	\$0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	DLITICAL EXPENDITURES		\$	\$0.00
	4. TOTAL POLITICAL E	XPENDITURES		\$	\$612.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CON REPORTING PERIOD	TRIBUTIONS MAINTAINED AS OF THE LAST	DAY OF THE	\$	\$612.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN	DUNT OF ALL OUTSTANDING LOANS AS OF NG PERIOD	THE LAST	\$	\$0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of per and correct and includes all informatio Title 15, Election Code.			
		Chris	i Tucek		
AFFIX NOTARY	STAMP / SEAL ABOVE	Signature of Ca	mpaign Treasur	er	_
Sworn to and subscribed	before me, by the said	, 1	his the		day
		h, witness my hand and seal of office.			
Signature of officer ad	ministering oath Prin	ted name of officer administering oath	Title of office	er administe	ring oath

### **SUBTOTALS - SPAC**

# FORM SPAC COVER SHEET PG 3

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		3 01 7
17 COMMITTEE NAME	18 Filer ID	(Ethics Commission Filers)
CROPS	00088690	
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 0.00
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0.00
3. X SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LA ORGANIZATION	BOR	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPOLABOR ORGANIZATION	RATION OR	\$
6. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABO	R ORGANIZATION	\$
7. X SCHEDULE E: LOANS		\$ 0.00
8. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$ 612.00
9. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
10. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBU	ITIONS	\$ 0.00
11. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00
12. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINES	SS OF C/OH	\$
13. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBU	TIONS	\$
14. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION TO FILER	IS RETURNED	\$

PLE	DGED CONTRIBU	TIONS				SCHEDULE B	
The Instruction Guide explains how to complete this form.  2 FILER NAME CROPS			1	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/7			
			3	Filer ID (Ethics Commission Filers) 00088690			
4 TOTAL	. OF UNITEMIZED PLEDO	GES			\$	0.00	
<b>5</b> Date	6 Full name of pledgor	out-of-state PAC (ID#:		8	Amount of pledge (\$)	9 In-kind description (If applicable)	
	7 Pledgor Address;	City; State; Zip Code					
				] [	Check if travel ou	tside of Texas. Complete Schedule T.	
<b>10</b> Principal	occupation / Job title (See Instru	uctions)	11 Employer (See Instr	ructio	ons)		

L(	OANS					SCHEDUI	LE <b>E</b>
Th	ne Instructio	n Guide explains ho	w to complete this f	orm.	1	ages Schedule E: /1 Rpt: 5/7	
	ER NAME				3 Filer ID 00088	(Ethics Commission	Filers)
4 TC	OTAL OF UN	IITEMIZED LOANS			•	\$	0.00
<b>5</b> Da	te of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)	
fina	ender a ancial titution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
<b>12</b> Pri	ncipal occupatio	on / Job title (See Instructio	ns)	13 Employer (See Instruction	s)	-	
<b>14</b> De	scription of Coll	ateral		15 Check if personal funds w	ere deposite	d into political account (See Instructions)	
	JARANTOR FORMATION	17 Name of guarantor				19 Amount Guarante	ed (\$)
	not applicable	<b>18</b> Guarantor address;	City; State;	Zip Code			
<b>20</b> Pri	ncipal occupation	l on		21 Employer (See Instruction	s)	<u> </u>	

### 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

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

Credit Card Payment	The Instruction Guide explains how to cor	nplete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 6/7	CROPS	00088690
4 Date	5 Payee name	
07/02/2024	Les Beaux Art Club	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de
\$612.00	PO Box 1124	
Expenditure from corporate funds	Clarendon, TX 79226	
8 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	Check if Austin, TX, officeholder living expense
		We gave our remaining monies to this organization because they help with arts in our school
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht Office held

### POLITICAL COMMITTEE **AFFIDAVIT OF DISSOLUTION**

#### FORM PAC-DR

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only if "Report Type" on page 1 is marked "Dis		
COMMITTEE NAME		2 Filer ID (Ethics Commission Filers)
CROPS		00088690
Affidavit of Dissolution		
I, the undersigned campaign treasurer, do not expe	act the accurrance of any furth	por roportable activity by this politic
committee for this or any other campaign or election	on for which reporting under th	e Election Code is required. I
declare that all of the information required to be repreport as a dissolution report terminates the appoir		
committee may not make or authorize political exp		
appointment of campaign treasurer on file.		Ç
	Cl	hrisi Tucek
	Signature of	Campaign Treasurer
	DO NOT SIGN UNLESS POLITI	CAL COMMITTEE IS TO BE DISSOLVED
AFFIX NOTARY STAMP / SEAL ABOVE		
,		
Sworn to and subscribed before me, by the said	thi	s the day of
20, to certify which, witness my hand and seal of office		ady of
Signature of officer administering oath Printed name	me of officer administering oath	Title of officer administering oath