

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00085198	<b>2</b> Total pages filed: 6
<b>3</b> COMMITTEE NAME Live Oak County Democrats		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 07/02/2024	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 712 FM 1358  Three Rivers, TX 78071		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
		Lisa M.	
		NICKNAME	LAST SUFFIX
			Torres
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS  <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 14639 Greenfield Mill  San Antonio, TX 78254		
	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 712 FM 1358  Three Rivers, TX 78071		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 14639 Greenfield Mill  San Antonio, TX 78254		
	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 712 FM 1358  Three Rivers, TX 78071		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		(210) 668-8580	
<b>9</b> 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	
<b>10</b> PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	01/01/2024		06/30/2024
<b>11</b> ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year	<input type="checkbox"/> Primary	<input 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

<b>12 COMMITTEE NAME</b> Live Oak County Democrats	<b>13 Filer ID</b> (Ethics Commission Filers) 00085198
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$	0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold		
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	90.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$	0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$	0.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$	90.00
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$	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.

\_\_\_\_\_  
Lisa M. Torres  
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

<b>17</b> COMMITTEE NAME Live Oak County Democrats	<b>18</b> Filer ID (Ethics Commission Filers) 00085198
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<b>19</b> SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 90.00
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 type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/3 Rpt: 4/6
<b>2</b> FILER NAME Live Oak County Democrats		<b>3</b> Filer ID (Ethics Commission Filers) 00085198
<b>4</b> Date 06/13/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cruz, Brenda (Miss)	<b>7</b> Amount of Contribution (\$)
	<b>6</b> Contributor address; City; State; Zip Code  Laredo, TX 78045	
<b>8</b> Principal occupation / Job title (See Instructions) Regional Political Director		<b>9</b> Employer (See Instructions) TDP
Date 02/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cruz, Brenda (Miss)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Laredo, TX 78045	
Principal occupation / Job title (See Instructions) Regional Political Director		Employer (See Instructions) TDP
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cruz, Brenda (Miss)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Laredo, TX 78045	
Principal occupation / Job title (See Instructions) Regional Political Director		Employer (See Instructions) TDP
Date 04/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cruz, Brenda (Miss)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Laredo, TX 78045	
Principal occupation / Job title (See Instructions) Regional Political Director		Employer (See Instructions) TDP
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cruz, Brenda (Miss)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code  Laredo, TX 78045	
Principal occupation / Job title (See Instructions) Regional Political Director		Employer (See Instructions) TDP

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/6
2 FILER NAME Live Oak County Democrats		3 Filer ID (Ethics Commission Filers) 00085198
4 Date 06/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cruz, Brenda (Miss) ..... 6 Contributor address; City; State; Zip Code  Laredo, TX 78045	7 Amount of Contribution (\$)  \$10.00
8 Principal occupation / Job title (See Instructions) Regional Political Director		9 Employer (See Instructions) TDP
Date 01/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Malissa ..... Contributor address; City; State; Zip Code  Three Rivers, TX 78071	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) retired
Date 02/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Malissa ..... Contributor address; City; State; Zip Code  Three Rivers, TX 78071	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) retired
Date 03/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Malissa ..... Contributor address; City; State; Zip Code  Three Rivers, TX 78071	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) retired
Date 04/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Malissa ..... Contributor address; City; State; Zip Code  Three Rivers, TX 78071	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/3 Rpt: 6/6
<b>2</b> FILER NAME Live Oak County Democrats		<b>3</b> Filer ID (Ethics Commission Filers) 00085198
<b>4</b> Date 05/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Malissa <b>6</b> Contributor address; City; State; Zip Code  Three Rivers, TX 78071	<b>7</b> Amount of Contribution (\$)  \$5.00
<b>8</b> Principal occupation / Job title (See Instructions) Farmer		<b>9</b> Employer (See Instructions) retired
Date 06/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Torres, Malissa Contributor address; City; State; Zip Code  Three Rivers, TX 78071	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) retired