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) 00055933 3 COMMITTEE NAME **OFFICE USE ONLY** African Coalition Political Action Committee Date Received **ELECTRONICALLY FILED** 07/05/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 12401 S. Post Oak Rd., Ste. D Date Hand-delivered or Date Postmarked Change of Address Houston, TX 77045-2021 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Azeb NAME NICKNAME LAST **SUFFIX** Yusuf STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 13051 Lawsons Creek Lane STREET **ADDRESS** (Residence or Business) Houston, TX 77072 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 13051 Lawsons Creek Lane MAILING **ADDRESS** Houston, TX 77072 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 894-5891 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** 01/01/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 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)			
African Coalition Poli	00055933				
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)	applicable, diasony by party.)	B. Opposed			
	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.)				
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00	
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00	
EXPENDITURE TOTALS				0.00	
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00	
CONTRIBUTION BALANCE	•	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			
OUTSTANDING LOAN TOTALS		6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			
16 AFFIDAVIT	•		•		
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.			
		Azeb	Yusuf		
		Signature of Car	mpaign Treasurer		
AFFIX NOTA	RY STAMP / SEAL ABOVE				
Sworn to and subscrib	ed before me, by the said	, th	nis the	day	
		which, witness my hand and seal of office.			
Signature of officer	administering oath	Printed name of officer administering oath	Title of officer admini	stering oath	

SUBTOTALS - GPAC

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	18 Filer ID	(Ethics Commission Filer	s)	
	00055933			
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE				
CAL CONTRIBUTIONS		\$	0.00	
I-KIND) POLITICAL CONTRIBU	UTIONS	\$	0.00	
TIONS		\$	0.00	
IBUTIONS FROM CORPORAT	TION OR LABOR	\$		
I-KIND) CONTRIBUTIONS FRO	OM CORPORATION OR	\$		
RT FROM CORPORATION OF	R LABOR ORGANIZATION	\$		
JPPORT FROM CORPORATIO	ON OR LABOR	\$		
ITIONS FROM CORPORATION	N OR LABOR ORGANIZATION	\$		
		\$	0.00	
TURES FROM POLITICAL CC	ONTRIBUTIONS	\$	0.00	
OBLIGATIONS		\$	0.00	
STMENTS FROM POLITICAL	CONTRIBUTIONS	\$	0.00	
DE BY CREDIT CARD		\$	0.00	
NDITURES FROM POLITICAL	CONTRIBUTIONS	\$		
GAINS, REFUNDS, AND CON	TRIBUTIONS RETURNED	\$		
	JTIONS LIBUTIONS FROM CORPORATION N-KIND) CONTRIBUTIONS FROM CORPORATION OF UPPORT FROM CORPORATION JTIONS FROM CORPORATION ITURES FROM POLITICAL CO OBLIGATIONS ESTMENTS FROM POLITICAL IDE BY CREDIT CARD NDITURES FROM POLITICAL	CAL CONTRIBUTIONS N-KIND) POLITICAL CONTRIBUTIONS DITIONS RIBUTIONS FROM CORPORATION OR LABOR N-KIND) CONTRIBUTIONS FROM CORPORATION OR RT FROM CORPORATION OR LABOR ORGANIZATION UPPORT FROM CORPORATION OR LABOR JTIONS FROM CORPORATION OR LABOR ORGANIZATION ITURES FROM POLITICAL CONTRIBUTIONS OBLIGATIONS ESTMENTS FROM POLITICAL CONTRIBUTIONS	SUBTOTAL AMOUNT CAL CONTRIBUTIONS SHAKIND) POLITICAL CONTRIBUTIONS SHIBUTIONS FROM CORPORATION OR LABOR SHIBUTIONS FROM CORPORATION OR LABOR SHIBUTIONS FROM CORPORATION OR SHIBUTIONS FROM CORPORATION OR SHIBUTIONS FROM CORPORATION OR SHIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SHIPPORT FROM CORPORATION OR LABOR ORGANIZATION SHIPPORT FROM CORPORATION OR LABOR ORGANIZATION SHIPPORT FROM POLITICAL CONTRIBUTIONS	

PLE	DGED CONTRIBUTI	ONS			SCHEDULE B	
The Instruction Guide explains how to complete this form.				1	Total pages Schedule B: Sch: 1/1 Rpt: 4/5	
2 FILER NAME African Coalition Political Action Committee			3			
4	OF UNITEMIZED PLEDGE				\$ 0.0	
5 Date	6 Full name of pledgorout-of-state PAC (ID#:)) 8	Amount of 9 In-kind description pledge (\$) (If applicable)		
	7 Pledgor Address;	City; State; Zip Code			 	
][Check if travel outside of Texas. Complete Schedul	
10 Principal	occupation / Job title (See Instruction	ons)	11 Employer (See Instr	ructi	ions)	

	LOANS					SCHED	ULE E		
	The Instruction Guide explains how to complete this form				ages Schedule E: ./1 Rpt: 5/5				
	2 FILER NAME African Coalition Political Action Committee				3 Filer ID (Ethics Commission Filers) 00055933				
4	TOTAL OF UN	IITEMIZED LOANS			•	\$	0.00		
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$	5)		
	Is lender a financial institution?	8 Lender address; City;	State;	Zip Code		10 Interest Rate			
						11 Maturity Date			
12	Principal occupation	on / Job title (See Instructions)		13 Employer (See Instructions)					
14	Description of Coll None	ateral		15 Check if personal funds were deposited into political account (See Instructions)					
	GUARANTOR INFORMATION	17 Name of guarantor		<u> </u>		19 Amount Guarar	iteed (\$)		
	not applicable	18 Guarantor address; City;	State;	Zip Code					
20	Principal occupation	on		21 Employer (See Instruction	s)	1			