#### 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) 00086758 3 COMMITTEE NAME **OFFICE USE ONLY** Jefferson County Indivisible Date Received **ELECTRONICALLY FILED** 07/07/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 9235 Riggs St. Date Hand-delivered or Date Postmarked Change of Address Beaumont, TX 77707 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Joe NAME NICKNAME LAST **SUFFIX** Evans Jr. STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 9235 Riggs St. STREET **ADDRESS** (Residence or Business) Beaumont, TX 77707 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 904 Park Meadow Dr. MAILING **ADDRESS** Beaumont, TX 77706 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (409) 444-8048 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 11/04/2024 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)
Jefferson County Indivisi	00086758	3		
ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	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	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	8,495.91
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u>'</u>	
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.		
		Mr. Joe	Evans Jr.	
		Signature of Car	mpaign Treası	urer
AFFIX NOTARY S	STAMP / SEAL ABOVE			
Sworn to and subscribed t	before me, by the said	, th	nis the	day
of	, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer adn	ninistering oath	Printed name of officer administering oath	Title of offi	cer administering oath

#### **SUBTOTALS - GPAC**

# FORM **GPAC**COVER SHEET PG 3

			3 of 6
<b>17</b> COMMIT	TEE NAME	18 Filer ID	(Ethics Commission Filers)
Jefferso	n County Indivisible	,	
19 SCHEDU NAME C	SUBTOTAL AMOUNT		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	?	\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 1,000.00
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. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	<b>\$</b> 75.00
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

### 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 Git/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice/Magas/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (other a cottographed listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ı - ıl Co	mmittee	Legal Se		Expense uide explains	Printing Exp Salaries/Wa	ense ges/Contrac		Travel Out of D OTHER (enter a	istrict a category not listed above)
┰	Total pages Schedule F1:	2	EII ER NAM			•		•		Filer ID	(Ethics Commission Filers)
ľ	Sch: 1/1 Rpt: 4/6	-	Jefferson C		Indivisible	د			آ ا	00086758	(======================================
Ļ		<u> </u>			marvisible					00000730	
4		5	Payee name								
	06/14/2024		Evans, Joe	!							
6	Amount (\$)	7	Payee addre	ess;	City;	State	; Zip Cod	е			
	\$1,000.00		9235 riggs								
	Expenditure from corporate funds		Beaumont,	TX 77	707						
8	PURPOSE	(a)					/	b) Descr	intion		
ľ	OF	اس	Category (S Consulting			he top of this scl	nedule)			tside of Texas. Cor	nolete Schedule T.
	EXPENDITURE		Consuming	Lybeii	3C					X, officeholder livin	
								pollin	ıg		
								canv	assing		
9	Complete ONLY if direct		Candidate/Off	iceholde	er name	(	Office soug	nt		Office h	eld
	expenditure to benefit C/OF	Η					ū				
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# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE I

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule I:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
Sch: 1/2 Rpt: 5/6	Jefferson County Indivisible 00086758				
4 Date	5 Payee name				
02/29/2024	Wood Forest National Bank				
6 Amount (\$)	7 Payee Address; City; State; Zip				
15.00	3775 Dowlen Rd. STE. B				
Expenditure from corporate funds	Beaumont , TX 77706				
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)				
OF EXPENDITURE	Accounting/Banking Fees				
Date	Payee name				
03/31/2024	Wood Forest National Bank				
Amount (\$)	Payee Address; City; State; Zip				
15.00	3775 Dowlen Rd. STE. B				
Expenditure from					
corporate funds	Beaumont , TX 77706				
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)				
OF EXPENDITURE	Accounting/Banking Fees				
EXI ENDITORE					
Date	Payee name				
04/30/2024	Wood Forest National Bank				
Amount (\$)	Payee Address; City; State; Zip				
15.00	3775 Dowlen Rd. STE. B				
Expenditure from					
corporate funds	Beaumont , TX 77706				
PURPOSE OF	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)				
EXPENDITURE	Accounting/Banking fees				
Data	Device warms				
Date 05/31/2024	Payee name Wood Forest National Bank				
Amount (\$)	Payee Address; City; State; Zip				
15.00	3775 Dowlen Rd. STE. B				
Expenditure from corporate funds	Beaumont , TX 77706				
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)				
OF	Accounting/Banking Fees				
EXPENDITURE					
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		AL EXPENDITURES POLITICAL CONTRIBUTIONS	SCHEDULE I
		The Instruction Guide explains how to complete this	form.
1	Total pages Schedule I: Sch: 2/2 Rpt: 6/6	2 FILER NAME Jefferson County Indivisible	3 Filer ID (Ethics Commission Filers) 00086758
4	Date 06/30/2024	5 Payee name Wood Forest National Bank	
6	Amount (\$)  15.00  Expenditure from	7 Payee Address; City; State; Zip 3775 Dowlen Rd. STE. B	
8	corporate funds  PURPOSE  OF  EXPENDITURE	Beaumont , TX 77706  (a) Category (See instructions for examples of acceptable categories) Accounting/Banking  (b) Description fees	(See instructions regarding type of information required.)