

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00015811	2 Total pages filed: 13
3 COMMITTEE NAME Texas Library PAC		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/07/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	1413 Keisa Lane		
	Irving, TX 75060		
	Date Hand-delivered or Date Postmarked		
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mr.	Walter L.	
		NICKNAME	SUFFIX
		Betts	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	1413 Keisa Lane Irving, TX 75060		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	1413 Keisa Lane Irving, TX 75060		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(972)	979-6587	
9 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		
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	01/01/2024		06/30/2024
11 ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Runoff <input type="checkbox"/> Special <input type="checkbox"/> Other

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Texas Library PAC	13 Filer ID (Ethics Commission Filers) 00015811
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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.)	Rep. DeWayne Burns State Representative

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,495.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 8,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 8,790.70
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 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.

Mr. Walter L. Betts

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**
ADDENDUM

Page 3 of 13

12 COMMITTEE NAME Texas Library PAC		13 Filer ID (Ethics Commission Filers) 00015811
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported 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.)	Rep. Drew Darby State Representative
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported 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.)	Rep. Gary Van Deaver State Representative
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported 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.)	Rep. Gary Van Deaver State Representative
	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported 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.)	Rep. Hugh Shine State Representative

SUBTOTALS - GPAC

17 COMMITTEE NAME Texas Library PAC		18 Filer ID (Ethics Commission Filers) 00015811
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,495.00
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 8,000.00
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 checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 147.66
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/6 Rpt: 5/13
2 FILER NAME Texas Library PAC		3 Filer ID (Ethics Commission Filers) 00015811
4 Date 04/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betts, Kristi <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75060	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 01/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betts, Walter <hr/> Contributor address; City; State; Zip Code Irving, TX 75060	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) UT Arlington
Date 01/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betts, Walter <hr/> Contributor address; City; State; Zip Code Irving, TX 75060	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) UT Arlington
Date 04/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Betts, Walter <hr/> Contributor address; City; State; Zip Code Irving, TX 75060	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) UT Arlington
Date 01/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Steven <hr/> Contributor address; City; State; Zip Code North Richland Hills, TX 76180	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/6 Rpt: 6/13
2 FILER NAME Texas Library PAC		3 Filer ID (Ethics Commission Filers) 00015811
4 Date 02/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottschalk, Mark	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76133		
8 Principal occupation / Job title (See Instructions) librarian		9 Employer (See Instructions) Tarrant County College
Date 03/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottschalk, Mark	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fort Worth, TX 76133		
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) Tarrant County College
Date 04/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottschalk, Mark	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fort Worth, TX 76133		
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) Tarrant County College
Date 05/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottschalk, Mark	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fort Worth, TX 76133		
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) Tarrant County College
Date 06/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gottschalk, Mark	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Fort Worth, TX 76133		
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) Tarrant County College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/6 Rpt: 7/13
2 FILER NAME Texas Library PAC		3 Filer ID (Ethics Commission Filers) 00015811
4 Date 04/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hand, Dorcas	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code HOUSTON, TX 77008	
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 04/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hand, Dorcas	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77008	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 05/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hand, Dorcas	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77008	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 06/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hand, Dorcas	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77008	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 04/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLane, Curren	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Weatherford, TX 76087	
Principal occupation / Job title (See Instructions) library director		Employer (See Instructions) City of Azle

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/6 Rpt: 8/13
2 FILER NAME Texas Library PAC		3 Filer ID (Ethics Commission Filers) 00015811
4 Date 04/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Place, Amanda <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77379	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) librarian		9 Employer (See Instructions) Harris County Public Library
Date 01/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Edward <hr/> Contributor address; City; State; Zip Code Abilene, TX 79691	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) Abilene Library Consortium
Date 01/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Edward <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) Abilene Library Consortium
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Edward <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) Abilene Library Consortium
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Edward <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) Abilene Library Consortium

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/6 Rpt: 9/13
2 FILER NAME Texas Library PAC		3 Filer ID (Ethics Commission Filers) 00015811
4 Date 04/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Edward <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79601	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) librarian		9 Employer (See Instructions) Abilene Library Consortium
Date 05/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Edward <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) Abilene Library Consortium
Date 06/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Edward <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) Abilene Library Consortium
Date 06/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Patricia <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) librarian		Employer (See Instructions) Abilene Library Consortium
Date 04/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Standley, Jeanne <hr/> Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/6 Rpt: 10/13
2 FILER NAME Texas Library PAC		3 Filer ID (Ethics Commission Filers) 00015811
4 Date 04/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) W Sullivan, Rebecca <hr/> 6 Contributor address; City; State; Zip Code TERRELL, TX 75160	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired

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
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 11/13	2 FILER NAME Texas Library PAC	3 Filer ID (Ethics Commission Filers) 00015811
4 Date 03/02/2024	5 Payee name DeWayne Burns for State Representative	
6 Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 703 Stonelake Drive Cleburne, TX 76033	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name DeWayne, Burns (Rep.)	Office sought State Representative District 58
		Office held State Representative District 58
Date 03/02/2024	Payee name Drew Darby Campaign	
Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 3284 San Angelo, TX 76902	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Darby, Drew (Rep.)	Office sought State Representative District 72
		Office held State Representative District 72
Date 03/02/2024	Payee name Gary Van Deaver Campaign	
Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O Box 866 New Boston, TX 75570	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Van Deaver, Gary (Rep.)	Office sought State Representative District 1
		Office held State Representative District 1

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Credit Card Payment | 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: Sch: 2/2 Rpt: 12/13	2 FILER NAME Texas Library PAC	3 Filer ID (Ethics Commission Filers) 00015811
4 Date 03/02/2024	5 Payee name Hugh Shine Campaign	
6 Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 793 Temple, TX 76503	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Hugh, Shine (Rep.)	Office sought State Representative District 55
		Office held State Representative District 55

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Texas Library PAC	3 Filer ID (Ethics Commission Filers) 00015811
4 Date 02/27/2024	5 Payee name Betts	
6 Amount (\$) 62.71 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 1413 Keisa Lane Irving, TX 75060	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Website Reimbursement
Date 02/27/2024	Payee name Betts	
Amount (\$) 19.95 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1413 Keisa Lane Irving, TX 75060	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Website Reimbursement
Date 04/12/2024	Payee name Betts	
Amount (\$) 65.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1413 Keisa Lane Irving, TX 75060	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Convention Ribbons