GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1	Filer ID (Ethics Commission Filers) 00015811	2 Total pages fil	led: .3
3	COMMITTEE NAME				OFFICE I	JSE ONLY
	Texas Library PAC	:			Date Received	
					ELECTRONIC	ALLY FILED
					07/07/2024	
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CI	ΓY;	STATE; ZIP CODE		
	ADDRESS	1413 Keisa Lane			Date Hand-delivered o	r Date Postmarked
	Change of Address				Bate Hand delivered o	- Date - Ostinarica
		Irving, TX 75060			Receipt #	Amount
					Date Processed	
					Date Imaged	
5	CAMPAIGN	MS / MRS / MR FIRST			MI	
	TREASURER NAME	Mr. Walter L.				
		NICKNAME LAST			SUFFIX	
		Betts				
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY;	57/	ATE; ZIP CODE
0	TREASURER	1413 Keisa Lane		APT/SUITE#, CITT,	517	ATE, ZIP CODE
	STREET ADDRESS					
	(Residence or Business)	Irving, TX 75060				
7	CAMPAIGN	STREET OR PO BOX;		APT / SUITE #; CITY	/; S1	TATE; ZIP CODE
	TREASURER MAILING	1413 Keisa Lane				
	ADDRESS					
	Change of Address	Irving, TX 75060				
8	CAMPAIGN	AREA CODE PHONE NUMBER	FY	TENSION		
ľ	TREASURER	(972) 979-6587		LINGION		
	PHONE					
9	REPORT	January 15 3	Oth d	lay before election	Dissolution (Attac	ch PAC-DR)
	TYPE		h da	ay before election	10th day after ca	mpaign treasurer
		X July 15		Ľ	termination	inpaight totataio.
			uno	П		
10	PERIOD COVERED	Month Day Year		Month Day	Year	
	COVERED	01/01/2024 Т	HR	DUGH 06/30/202	24	
11	ELECTION	ELECTION DATE		ELECTION TYPE		
			Prim	_	Other	
			Gene	eral Special		
		I I				
		GO	то	PAGE 2		
For	rms provided by Tex	xas Ethics Commission www.e	thic	s.state.tx.us	Versio	on V4.1.0.d378aba0

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME		:	13 Filer ID	(Ethics Commission Filers)
Texas Library PAC			00015811	
14 COMMITTEE 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	Rep. DeWayne Burns State Re	epresentative	
	(Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M) POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) gualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA		\$	1,495.00
EXPENDITURE TOTALS	`	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	8,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	8,790.70
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code.		
			er L. Betts	
		Signature of Can	npaign Treasur	rer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, th	is the	day
of	_, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer ad	Iministering oath	Printed name of officer administering oath	Title of offic	er administering oath
Signature of onicer at	anning out	a miles name of onliver duministering batt		or administering odur
Forms provided by Texas I	Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.d378aba0

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC

Page 3 of 13

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas Library PAC				00015811	
14 COMMITTEE 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		Rep. Drew Darby State Represe	entative	
	applicable, classify by party.)				
COMMITTEE 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.)		Rep. Gary Van Deaver State Re	epresentative	
COMMITTEE 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		Rep. Hugh Shine State Represe	entative	
	applicable, classify by party.)				

SU	JBT	OTALS - GPAC	C	OVE	FORM GPAC R SHEET PG 3 4 of 13
		EE NAME rary PAC	18 Filer ID 00015811	(Ethio	cs Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,495.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABC ORGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
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.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	5	\$	8,000.00
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	DNS	\$	147.66
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

L						
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/6 Rpt: 5/13	
2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)	
	Texas Librar				00015811	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	04/12/2024	Betts, Kristi				\$100.00
		6 Contributor address; City; State; Zip Code		1		
		Irving, TX 75060				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	retired		retired			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/01/2024	Betts, Walter				\$5.00
		Contributor address; City; State; Zip Code				
		Irving, TX 75060				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	librarian		UT Arlington			
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	01/01/2024	Betts, Walter			• •	\$5.00
		Contributor address; City; State; Zip Code	,			
		Irving, TX 75060				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	librarian		UT Arlington			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	04/12/2024	Betts, Walter	/		, incant of commenter (.,	\$100.00
	• <u></u>	Contributor address; City; State; Zip Code				+=•
		Contributor address, City, State, Zip Code				
		Irving, TX 75060				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	librarian		UT Arlington			
⊨	Date	Full name of contributor out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	01/02/2024	Brown, Steven	/		Allount of Contraction (1)	\$100.00
	01,01,11	Contributor address; City; State; Zip Code				#±00
		Continuation address, City, State, Lip Code				
		North Richland Hills, TX 76180				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ג)		
	retired		retired	,		
┝			100.00			

	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 6/13	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Texas Librar	y PAC				00015811	
4	Date		out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/07/2024	Gottschalk, Mark					\$25.00
	I	6 Contributor address; City; State; 2	Zip Code		1		
	I						
	l						
		Fort Worth, TX 76133			Ļ		
8		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	librarian			Tarrant County College			
	Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	03/07/2024	Gottschalk, Mark					\$25.00
	I	Contributor address; City; State; 2					
	I						
	I						
	D 1 1 1 1 1 1 1 1 1 1	Fort Worth, TX 76133			Ĺ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	librarian]	Tarrant County College			
	Date		out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	04/07/2024	Gottschalk, Mark					\$25.00
	I	Contributor address; City; State; 2	Zip Code				
	I						
	I	Fort Worth, TX 76133					
┝	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> וו		
	librarian			Tarrant County College	,		
╞		Full name of contributor			<u> </u>	Amount of Contribution (\$)	
	Date 05/07/2024	Gottschalk, Mark	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	05/01/2024		Z'z Oodo				φ20.00
	I	Contributor address; City; State; 2	Ζιρ Code				
	I						
	I	Fort Worth, TX 76133					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	librarian	· · · ·		Tarrant County College	,		
⊢	Date	Full name of contributor	out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	06/07/2024	Gottschalk, Mark		/			\$25.00
		Contributor address; City; State; 2	7in Code				¥
	I	Contributor address, ony, class,					
	I						
	I	Fort Worth, TX 76133					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	. 5)		
	librarian			Tarrant County College			
\vdash			1				

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

	The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 4/6 Rpt: 8/13
- -	FILER NAME			3 Filer ID (Ethics Commission Filers)
[Texas Librar	y PAC		00015811
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	04/17/2024	Place, Amanda		\$10.00
		6 Contributor address; City; State; Zip Code		1
		Spring, TX 77379		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	
	librarian		Harris County Public Lib	prary
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	01/01/2024	Smith, Edward		\$10.00
		Contributor address; City; State; Zip Code		1
		Abilene, TX 79691		
		pation / Job title (See Instructions)	Employer (See Instructions	•
	librarian		Abilene Library Consorti	ium
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	01/12/2024	Smith, Edward		\$10.00
		Contributor address; City; State; Zip Code		1
		Abilene, TX 79601		
		pation / Job title (See Instructions)	Employer (See Instructions	•
	librarian		Abilene Library Consorti	ium
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	02/12/2024	Smith, Edward		\$10.00
		Contributor address; City; State; Zip Code		1
		Abilene, TX 79601		
		pation / Job title (See Instructions)	Employer (See Instructions	•
	librarian		Abilene Library Consorti	ium
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	03/12/2024	Smith, Edward		\$10.00
		Contributor address; City; State; Zip Code		
		Abilene, TX 79601		
		pation / Job title (See Instructions)	Employer (See Instructions	
	librarian		Abilene Library Consorti	ium

The Instruction Guide explains how to complete this form. 2 FILER NAME Texas Library PAC 4 Date 04/12/2024 5 Full name of contributor out-of-state PAC (ID#:) Smith, Edward 6 Contributor address; City; State; Zip Code	 Total pages Schedule A1: Sch: 5/6 Rpt: 9/13 Filer ID (Ethics Commission 00015811 Amount of Contribution (\$) 	n Filers) \$10.00
Texas Library PAC 4 Date 5 Full name of contributor 04/12/2024 Smith, Edward	00015811	
4 Date 5 Full name of contributor image: out-of-state PAC (ID#:) 04/12/2024 Smith, Edward	00015811	
04/12/2024 Smith, Edward	7 Amount of Contribution (\$)	\$10.00
		410 .00
Abilene, TX 79601		
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions	<u>ا</u> ۶)	
librarian Abilene Library Consorti		
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
05/12/2024 Smith, Edward	Amount of Contribution (4)	\$10.00
Contributor address; City; State; Zip Code		Ψ±0.00
Contributor address, City, State, Zip Code		
Abilene, TX 79601		
Principal occupation / Job title (See Instructions) Employer (See Instructions	<u>ا</u> ۱	
librarian Abilene Library Consorti		
	Amount of Contribution (\$)	
Date Full name of contributor out-of-state PAC (ID#:) 06/12/2024 Smith, Edward		\$10.00
		Φ10.00
Contributor address; City; State; Zip Code		
Abilene, TX 79601		
Principal occupation / Job title (See Instructions) Employer (See Instructions	<u></u>	
librarian Abilene Library Consorti		
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	\$100.00
06/11/2024 Smith, Patricia		\$100.00
Contributor address; City; State; Zip Code		
Austin, TX 78704		
Principal occupation / Job title (See Instructions) Employer (See Instructions	<u>ا</u> ۵)	
librarian Abilene Library Consorti		
	Amount of Contribution (\$)	
Date Full name of contributor Out-of-state PAC (ID#:	Amount of Contribution (*)	\$100.00
Date Full name of contributor out-of-state PAC (ID#:) 04/17/2024 Standley, Jeannne		<i>4</i>100101
04/17/2024 Standley, Jeannne		
04/17/2024 Standley, Jeannne		
04/17/2024 Standley, Jeannne Contributor address; City; State; Zip Code		
04/17/2024 Standley, Jeannne Contributor address; City; State; Zip Code Flint, TX 75762	- 	
04/17/2024 Standley, Jeannne Contributor address; City; State; Zip Code		

	MONET	ARY POLITICAL CONTRIBUTION	S		SCHEDULE	E A1
	The Instru	ction Guide explains how to complete this form	ı.		Total pages Schedule A1: Sch: 6/6 Rpt: 10/13	
2	P FILER NAME STREAM ST				Filer ID (Ethics Commission 00015811	Filers)
4	Date 04/17/2024	 5 Full name of contributor out-of-state PAC (ID#: W Sullivan, Rebecca 6 Contributor address; City; State; Zip Code TERRELL, TX 75160)	7	Amount of Contribution (\$)	\$200.00
8	Principal occu retired		Employer (See Instructions	5)		

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/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District - Gift/Awards/Memorials Expense Travel Out of District
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/2 Rpt: 11/13	Texas Library PAC 00015811
4 Date	5 Payee name
03/02/2024	DeWayne Burns for State Representative
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,000.00	703 Stonelake Drive
Expenditure from corporate funds	Cleburne, TX 76033
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder nameOffice soughtOffice heldIDeWayne, Burns (Rep.)State Representative District 58State Representative District 58
Date 03/02/2024	Payee name Drew Darby Campaign
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code P.O. Box 3284
corporate funds	San Angelo, TX 76902
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	¹ Darby, Drew (Rep.) State Representative District 72 State Representative District 72
Date 03/02/2024	Payee name Gary Van Deaver Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	P.O Box 866
Expenditure from corporate funds	New Boston, TX 75570
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	¹ Van Deaver, Gary (Rep.) State Representative District 1 State Representative District 1

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Comm Credit Card Payment	EXPENDITURE CATEGOF Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	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)
1 Total names Calendula 51: 2 5	· · ·		Filer ID (Ethics Commission Filers)
1 Total pages Schedule F1: 2 FI			Filer ID (Ethics Commission Filers)
Sch: 2/2 Rpt: 12/13	exas Library PAC		00015811
4 Date 5 Pa	ayee name	•	
	lugh Shine Campaign		
		Zip Code	
\$2,000.00 P	.O. Box 793		
Expenditure from			
corporate funds	emple, TX 76503		
8 PURPOSE (a) C. OF EXPENDITURE	ategory (See Categories listed at the top of this sch	Check if travel outsid	le of Texas. Complete Schedule T. officeholder living expense
9 Complete <u>ONLY</u> if direct Car	ndidate/Officeholder name C	Office sought	Office held
and a difference that have a fit O/OLL			55 State Representative District 55

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

	The Instruction Guide explains how to	complete this form.
L Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Texas Library PAC	3 Filer ID (Ethics Commission Filers) 00015811
Date 02/27/2024	5 Payee name Betts	
Amount (\$) 62.71	 7 Payee Address; City; State; Zip 1413 Keisa Lane 	
corporate funds	Irving, TX 75060	
3 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	Payee Address; City; State; Zip 1413 Keisa Lane	
Expenditure from corporate funds	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	Payee Address; City; State; Zip 1413 Keisa Lane	
Expenditure from corporate funds	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