CORRECTION/AMENDMENT AFFIDAVIT FORM COR-PAC FOR POLITICAL COMMITTEE Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00087038 Date Received COMMITTEE Texas Early Childcare PAC **ELECTRONICALLY FILED** NAME 07/08/2024 TREASURER Clay Jr., John R. (Mr.) NAME Date Hand-delivered or Date Postmarked **ORIGINAL** January 15 Runoff REPORT TYPE Receipt # Amount July 15 10th day after campaign treasurer resignation Dissolution report 30th day before election Date Processed 8th day before election Other (specify) July 5 ORIGINAL PERIOD Month Month Year Day Year Day Date Imaged **COVERED THROUGH** 05/26/2024 06/25/2024 **EXPLANATION OF CORRECTION** Incorrectly entered contribution into wrong report/PAC and deleted the incorrect contribution. I revised total contributions held at time of period close to reflect correct number. AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. Mr. John R. Clay Jr. Signature of Campaign Treasurer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said ____, this the ___ _____, 20_____, to certify which, witness my hand and seal of office. Title of officer administering oath Signature of officer administering oath Printed name of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00087038 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Early Childcare PAC Date Received **ELECTRONICALLY FILED** 07/08/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 401 West 15th St. Suite 870 Change of Address Austin, TX 78701 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. John R. NAME Date Processed **NICKNAME** LAST **SUFFIX** Reed Date Imaged Clay Jr. CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE TREASURER 401 W. 15th Street Suite 870 STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** MAILING **ADDRESS** Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 831-6675 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 X July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 05/26/2024 06/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID	(Ethics Commission Filers)		
Texas Early Childcare PAC 0008			00087038	
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.)		B. Opposed		
	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	O 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	\$	0.00
CONTRIBUTION BALANCE	•	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		
OUTSTANDING LOAN TOTALS	1	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		
16 AFFIDAVIT	<u> </u>		<u>'</u>	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.	rjury, that the a mation required	accompanying report is d to be reported by me
		Mr. John	R. Clay Jr.	
		Signature of Car		rer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said	, th	nis 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 offic	cer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

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17 COMMITTEE NAME 18 Filer ID Texas Early Childcare PAC 00087038					es Commission Filers)
l ex	kas ⊨ai				
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE					SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			0.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			0.00
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS			0.00
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			
9.	X	SCHEDULE E: LOANS			0.00
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			0.00
11.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			0.00
12.	X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS			0.00
13.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			0.00
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			
15.	15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			\$	

PLEI	DGED CONTRIBU	TIONS			SCHEDULE E	3
The Instruction Guide explains how to complete this form.				1	. Total pages Schedule B: Sch: 1/1 Rpt: 5/6	
2 FILER NAME			3	Filer ID (Ethics Commission Filers)		
Texas E	Early Childcare PAC			+	00087038	
TOTAL	OF UNITEMIZED PLEDO	SES			\$	0.00
5 Date	6 Full name of pledgor	out-of-state PAC (ID#	·) 8	9 In-kind description pledge (\$) (If applicable)	
	7 Pledgor Address;	City; State; Zip Code			(i applicate)	
]	Check if travel outside of Texas. Complete Scheo	lule T
10 Principal	occupation / Job title (See Instru	ictions)	11 Employer (See Ins	tructi	ions)	

LOANS	SCHEDULE E		
The Instruction Guide explains how to complete this form.	1 Total pages Schedule E: Sch: 1/1 Rpt: 6/6		
2 FILER NAME Texas Early Childcare PAC	3 Filer ID (Ethics Commission Filers) 00087038		
4 TOTAL OF UNITEMIZED LOANS	\$ 0.00		
5 Date of loan 7 Name of lender	9 Loan Amount (\$)		
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code	10 Interest Rate		
	11 Maturity Date		
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions)	ructions)		
14 Description of Collateral None 15 Check if personal fu	inds were deposited into political account (See Instructions)		
16 GUARANTOR INFORMATION 17 Name of guarantor	19 Amount Guaranteed (\$)		
not applicable 18 Guarantor address; City; State; Zip Code			
20 Principal occupation 21 Employer (See Insti	ructions)		