

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME North Brazoria County Democratic Club	13 Filer ID (Ethics Commission Filers) 00034199
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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.)	

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)	\$ 3,321.81
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,336.71
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 4,303.00
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. Cooper G. Snapp

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

SUBTOTALS - GPAC

17 COMMITTEE NAME North Brazoria County Democratic Club		18 Filer ID (Ethics Commission Filers) 00034199
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,321.81
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	\$ 1,336.71
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	\$ 189.21
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: 1/7 Rpt: 4/16
2 FILER NAME North Brazoria County Democratic Club		3 Filer ID (Ethics Commission Filers) 00034199
4 Date 03/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, JoAnn <hr/> 6 Contributor address; City; State; Zip Code Alvin, TX 77511	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 02/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Change, Avolene <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Change, Avolene <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$170.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Change, Avolene <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daigle, Gene <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Mackay Marine

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/7 Rpt: 5/16
2 FILER NAME North Brazoria County Democratic Club		3 Filer ID (Ethics Commission Filers) 00034199
4 Date 01/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daigle, Gene <hr/> 6 Contributor address; City; State; Zip Code Alvin, TX 77511	7 Amount of Contribution (\$) \$170.00
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Mackay Marine
Date 01/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feules, Scott <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feules, Scott <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feules, Scott <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feules, Scott <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/7 Rpt: 6/16
2 FILER NAME North Brazoria County Democratic Club		3 Filer ID (Ethics Commission Filers) 00034199
4 Date 05/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feules, Scott <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 06/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Feules, Scott <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Al <hr/> Contributor address; City; State; Zip Code Houston, TX 77054	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Congress		Employer (See Instructions) United States
Date 01/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, John <hr/> Contributor address; City; State; Zip Code Angleton, TX 77515	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Brazosport College
Date 02/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, John <hr/> Contributor address; City; State; Zip Code Angleton, TX 77515	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Brazosport College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/16
2 FILER NAME North Brazoria County Democratic Club		3 Filer ID (Ethics Commission Filers) 00034199
4 Date 02/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, FJ <hr/> 6 Contributor address; City; State; Zip Code Rosharon, TX 77583	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Intake Professional		9 Employer (See Instructions) Houston Independent School District
Date 03/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Monte <hr/> Contributor address; City; State; Zip Code Pearland, TX 77581	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Kelly Services
Date 01/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mooney, Jim <hr/> Contributor address; City; State; Zip Code Pearland, TX 77851	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 03/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mooney, Jim <hr/> Contributor address; City; State; Zip Code Pearland, TX 77851	Amount of Contribution (\$) \$391.81
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Laura <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/16
2 FILER NAME North Brazoria County Democratic Club		3 Filer ID (Ethics Commission Filers) 00034199
4 Date 01/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Polk, Amanda <hr/> 6 Contributor address; City; State; Zip Code Manvel, TX 77578	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) MD Anderson Cancer Center
Date 02/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Herman <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Environmental Engineer		Employer (See Instructions) Harris County Pollution Control Services
Date 01/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spain, Charles <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Justice		Employer (See Instructions) Court of Appeals for the Fourteenth District of Texas
Date 05/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spruill, Robina <hr/> Contributor address; City; State; Zip Code Manvel, TX 77578	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Board Member		Employer (See Instructions) Manvel Economic Development
Date 02/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ursula, Sereal <hr/> Contributor address; City; State; Zip Code Manvel, TX 77578	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Saipem America

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/16
2 FILER NAME North Brazoria County Democratic Club		3 Filer ID (Ethics Commission Filers) 00034199
4 Date 01/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mann, robert <hr/> 6 Contributor address; City; State; Zip Code Pearland, TX 77584	7 Amount of Contribution (\$) \$170.00
8 Principal occupation / Job title (See Instructions) Facility Chemist		9 Employer (See Instructions) SET Environmental
Date 01/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mann, robert <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Facility Chemist		Employer (See Instructions) SET Environmental
Date 02/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mann, robert <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Facility Chemist		Employer (See Instructions) SET Environmental
Date 03/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mann, robert <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Facility Chemist		Employer (See Instructions) SET Environmental
Date 04/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mann, robert <hr/> Contributor address; City; State; Zip Code Pearland, TX 77584	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Facility Chemist		Employer (See Instructions) SET Environmental

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/16
2 FILER NAME North Brazoria County Democratic Club		3 Filer ID (Ethics Commission Filers) 00034199
4 Date 05/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mann, robert	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Pearland, TX 77584		
8 Principal occupation / Job title (See Instructions) Facility Chemist		9 Employer (See Instructions) SET Environmental
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mann, robert	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Pearland, TX 77584		
Principal occupation / Job title (See Instructions) Facility Chemist		Employer (See Instructions) SET Environmental
Date 01/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mann, robert	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Pearland, TX 77584		
Principal occupation / Job title (See Instructions) Facility Chemist		Employer (See Instructions) SET Environmental

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: 11/16	2 FILER NAME North Brazoria County Democratic Club	3 Filer ID (Ethics Commission Filers) 00034199
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4 Date 06/12/2024	5 Payee name Big Lots
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6 Amount (\$) \$44.90 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2028 North Main St Pearland, TX 77581
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Plates, Cups, Silverware for Candidate Event
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 03/18/2024	Payee name Brazoria County Democratic Party
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Amount (\$) \$391.81 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11800 Magnolia Pkwy ste 210 Manvel, TX 77578
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard Signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/12/2024	Payee name Manvel Seafood
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Amount (\$) \$300.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 19015 Hwy 6 Manvel, TX 77578
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Candidate Event
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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 -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/2 Rpt: 12/16	2 FILER NAME North Brazoria County Democratic Club	3 Filer ID (Ethics Commission Filers) 00034199
4 Date 06/12/2024	5 Payee name Merdiana Conservatory Rental	
6 Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 4003 Meridiana Parkway Iowa Colony, TX 77583	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate Event Rental Space
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/4 Rpt:	2 FILER NAME North Brazoria County Democratic Club	3 Filer ID (Ethics Commission Filers) 00034199
4 Date 01/07/2024	5 Payee name ActBlue	
6 Amount (\$) 1.98 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation fee
Date 01/14/2024	Payee name ActBlue	
Amount (\$) 11.48 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation Fee
Date 02/04/2024	Payee name ActBlue	
Amount (\$) 1.98 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation Fee
Date 02/11/2024	Payee name ActBlue	
Amount (\$) 1.98 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/4 Rpt:	2 FILER NAME North Brazoria County Democratic Club	3 Filer ID (Ethics Commission Filers) 00034199
4 Date 02/18/2024	5 Payee name ActBlue	
6 Amount (\$) 2.78 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation Fee
Date 02/25/2024	Payee name ActBlue	
Amount (\$) 5.93 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation Fee
Date 03/17/2024	Payee name ActBlue	
Amount (\$) 0.80 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation Fee
Date 03/24/2024	Payee name ActBlue	
Amount (\$) 9.88 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/4 Rpt:	2 FILER NAME North Brazoria County Democratic Club	3 Filer ID (Ethics Commission Filers) 00034199
4 Date 04/14/2024	5 Payee name ActBlue	
6 Amount (\$) 0.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation Fee
Date 06/12/2024	Payee name ActBlue	
Amount (\$) 0.40 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation Fee
Date 05/19/2024	Payee name ActBlue	
Amount (\$) 0.40 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation Fee
Date 06/16/2024	Payee name ActBlue	
Amount (\$) 0.80 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144-3132	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Donation Fee

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 4/4 Rpt:	2 FILER NAME North Brazoria County Democratic Club	3 Filer ID (Ethics Commission Filers) 00034199
4 Date 06/12/2024	5 Payee name United States Postal Service	
6 Amount (\$) 150.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 3519 Walnut St Pearland, TX 77581	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) PO Box Fee