## SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM SPAC COVER SHEET PG 1

The SPAC Instruction	Guide explains how to complete this form	. 1	Filer ID (Ethics Commission Filers) 00086986		2 Total pages filed: 5
3 COMMITTEE NAME					OFFICE USE ONLY
Advocates for LCI	SD				Date Received
					ELECTRONICALLY FILED 07/12/2024
4 COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY	STATE;	ZIP CODE	
ADDRESS	3014 Avenue I				Date Hand-delivered or Date Postmarked
Change of Address					
	Rosenberg, TX 77471				Receipt # Amount
					Date Processed
					Date Imaged
5 CAMPAIGN	MS / MRS / MR FIRST				MI
TREASURER NAME	Mr. Jeffrey				
	NICKNAME LAST				SUFFIX
	Wiley				
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASI	):	APT / SUITE #	; CITY	; STATE; ZIP CODE
TREASURER	2415 Hodges Bend Circle	,,			
STREET ADDRESS					
(Residence or Business)	Sugar Land, TX 77479				
	-				
7 CAMPAIGN TREASURER	STREET OR PO BOX;		APT / SUITE #	; CITY	; STATE; ZIP CODE
MAILING	2415 Hodges Bend Circle				
ADDRESS					
Change of Address	Sugar Land, TX 77479				
8 CAMPAIGN	AREA CODE PHONE NUMBER	ΕX	TENSION		
TREASURER	(713) 823-2125				
PHONE	(				
9 REPORT	January 15	30th d	ay before election		Exceeded modified reporting limit
TYPE					
		3th da	y before election		Dissolution (Attach PAC-DR)
	X July 15	Runof	f		10th day after campaign treasurer
				Mariath Da	termination
10 PERIOD COVERED	Month Day Year	тис	OUGH	Month Da	
	01/01/2024	1111	00011	06/30/	72024
11 ELECTION	ELECTION DATE		ELECTION	TYPE	
		Prima	_		Other
	11/07/2023				
		Gener	al Special		
GO TO PAGE 2					
Forms provided by Te	xas Ethics Commission www	.ethi	cs.state.tx.us		Version V4.1.0.d378aba0

## SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

## FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)		
Advocates for LCISD			00086986			
14 COMMITTEE PURPOSE		CANDIDATE / OFFICEHOLDER NAME				
(Attach lists on plain paper to complete this	Candidate					
report if necessary.)	Officeholder	OFFICE SOUGHT (candidate) / OFFICE HEL	D (officeholder)			
(Candidate or Measure)		BALLOT IDENTIFICATION / #	ELECTI	ON DATE		
		LCISD Bond	Month	Day Year		
(Candidate or Measure)	X Measure		11/07/2	2023		
ASSIST	X Measure	DESCRIPTION				
(Officeholder)		Proposition A for renovations and improvements of Traylor Stadium				
15 CONTRIBUTION TOTALS	I           1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED			\$ \$0.00		
	2. TOTAL POLITICAL CO	ONTRIBUTIONS				
	(OTHER THAN PLEDGES	S, LOANS, OR GUARANTEES OF LOANS)		\$ \$0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED PO	LITICAL EXPENDITURES		\$ \$0.00		
	4. TOTAL POLITICAL EX	(PENDITURES		\$ \$0.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ \$12,888.41		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN	UNT OF ALL OUTSTANDING LOANS AS OF G PERIOD	THE LAST	\$ \$0.00		
16 AFFIDAVIT	1			•		
		I swear, or affirm, under penalty of per and correct and includes all informatio Title 15, Election Code.				
		Mr lef	frey Wiley			
	mpaign Treasure	er				
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						
		www.ethice.etete.tv.ve		Marcian V/4 1 0 d070aba		

SU	BT	OTALS - SPAC	C		FORM SPAC SHEET PG 3 3 of 5
		EE NAME 6 for LCISD	18 Filer ID 00086986	(Ethics	Commission Filers)
	19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			S	JBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	0.00
2.	Х	\$	0.00		
3.	Х	\$	0.00		
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$	
6.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O	ORGANIZATION	\$	
7.	Х	SCHEDULE E: LOANS		\$	0.00
8.	8. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				0.00
9.	9. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS				0.00
10.	10. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS				0.00
11.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
12.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
13.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$	
14.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	
				·	

PLEDGED CONTRIBUTIONS	SCHEDULE B
The Instruction Guide explains how to complete this form	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5
2 FILER NAME Advocates for LCISD	3 Filer ID (Ethics Commission Filers) 00086986
<sup>4</sup> TOTAL OF UNITEMIZED PLEDGES	\$ 0.00
5 Date 6 Full name of pledgorout-of-state PAC (ID#:	8         Amount of pledge (\$)         9         In-kind description (If applicable)
<b>7</b> Pledgor Address; City; State; Zip Code	
	Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (See Instructions)         11 Employer (	(See Instructions)

LOANS SCHEDULE E							
I The Instruction Guide explains how to complete this form							
2 FILER NAME 3 Filer I					Filers)		
ITEMIZED LOANS			•	\$	0.00		
7 Name of lender	out-of-state PA	.C (ID#:	)	9 Loan Amount (\$)			
8 Lender address;	City; State;	Zip Code		10 Interest Rate			
				<b>11</b> Maturity Date			
on / Job title (See Instruction	s)	13 Employer (See Instructio	ns)				
ateral		15 Check if personal funds v	were deposite	d into political account (See Instructions)			
17 Name of guarantor		I		19 Amount Guarantee	ed (\$)		
<b>18</b> Guarantor address;	City; State;	Zip Code					
n		21 Employer (See Instructio	ns)	•			
	CISD ITEMIZED LOANS 7 Name of lender 8 Lender address; m / Job title (See Instruction ateral 17 Name of guarantor	CISD   ITEMIZED LOANS   7 Name of lender   aut-of-state PA   8 Lender address;   City;   State;   on / Job title (See Instructions) ateral 17 Name of guarantor 18 Guarantor address; City; State;	CISD   ITEMIZED LOANS   7 Name of lender   out-of-state PAC (ID#:	n Guide explains how to complete this form.       Sch: 1/         3 Filer ID       000861         CISD       000861         ITEMIZED LOANS       ITEMIZED LOANS         7 Name of lender       out-of-state PAC (ID#:)         8 Lender address;       City;       State;         8 Lender address;       City;       State;         13 Employer (See Instructions)       13 Employer (See Instructions)         ateral       15 Check if personal funds were deposited         17 Name of guarantor       Ia Guarantor address;         18 Guarantor address;       City;         State;       Zip Code	n Guide explains how to complete this form.       1       Total pages Schedule E: Sch: 1/1 Rpt: 5/5         3       Filer ID       (Ethics Commission I) 00086986         ITEMIZED LOANS       \$         7       Name of lender       out-of-state PAC (ID#:)         9       Loan Amount (\$)         8       Lender address;       City;         State;       Zip Code       10         11       Maturity Date         11       Maturity Date         12       State;       Zip Code         13       Employer (See Instructions)         14       15       Check if personal funds were deposited into political account (See Instructions)         17       Name of guarantor       19         18       Guarantor address;       City;       State;         2ip Code       19       Amount Guarantee		