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) 00085714	2 Total pages filed: 10
3	COMMITTEE NAME				OFFICE USE ONLY
	KISD Family Allian	се			Date Received
	2				
					07/12/2024
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; C	CITY	(; STATE; ZIP CODE	
	ADDRESS	P.O. Box 80382			Date Hand-delivered or Date Postmarked
					Date Hand delivered of Date Fostmarked
	Change of Address	Keller, TX 76244			Receipt # Amount
					Date Processed
					Date Hotessed
					Date Imaged
					Date integed
5	CAMPAIGN	MS/MRS/MR FIRST			MI
ľ	TREASURER	Mr. Douglas R.			
	NAME				
		NICKNAME LAST			SUFFIX
		Stamps			
6		STREET ADDRESS (NO PO BOX PLEASE));	APT / SUITE #; CITY;	STATE; ZIP CODE
	TREASURER STREET	P.O. Box 80382			
	ADDRESS				
	(Residence or Business)	Keller , TX 76244			
7	CAMPAIGN	STREET OR PO BOX;		APT / SUITE #; CITY	; STATE; ZIP CODE
Ľ	TREASURER	P.O. Box 80382			,
	MAILING ADDRESS	F.O. DUX 00302			
	Change of Address	Keller , TX 76244			
8	CAMPAIGN	AREA CODE PHONE NUMBER	E	XTENSION	
	TREASURER	(202) 674-9796			
	PHONE				
9	REPORT	January 15	20+	h day before election	Dissolution (Attach PAC-DR)
	TYPE		300	שמא שבוטוב בובכנוטוו	Dissolution (Attach PAC-DR)
			8th	day before election	10th day after campaign treasurer termination
		X July 15	Rur	noff	GITTITIAUOT
10	PERIOD COVERED	Month Day Year		Month Day	Year
		01/01/2024	ΓH	ROUGH 06/30/2024	4
11	ELECTION	ELECTION DATE	-		
		Month Day Year	Pri	imary Runoff	Other
			Ge	eneral Special	
			-		
		<u> </u>			
		<u> </u>	<u>л</u> т4	O PAGE 2	
For	rms provided by Tex	kas Ethics Commission www.	eth	lics.state.tx.us	Version 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)
KISD Family Alliance			00085714	
14 COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA		\$	750.00
		DGES, LOANS, OR GUARANTEES OF LOANS)		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEL	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	269.00
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		•	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Mr. Dougla	s R. Stamps	
		Signature of Car	npaign Treasu	rer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, tł	nis the	day
		which, witness my hand and seal of office.		
Signature of officer ad	ninistering oath	Printed name of officer administering oath	Title of offic	er administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.d378aba0

SUBTOTALS - GPAC	C	FORM GPAC OVER SHEET PG 3 3 of 10
17 COMMITTEE NAME 1 KISD Family Alliance 1	18 Filer ID 00085714	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 750.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	8	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAT LABOR ORGANIZATION	FION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	NIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR OF	RGANIZATION	\$
9. SCHEDULE E: LOANS		\$
10. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	NS	\$
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. X SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	NS	\$ 423.24
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RI TO FILER	ETURNED	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/10
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
KISD Family Alliance	00085714
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
02/27/2024 Schelbitzki, Victoria	\$600.00
6 Contributor address; City; State; Zip Code	
Fort Worth, TX 76244	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	ructions)
Self Employed Self Employed	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
01/15/2024 Wurtele, Gregory	\$25.00
Contributor address; City; State; Zip Code	
Keller, TX 76244	
Principal occupation / Job title (See Instructions) Employer (See Instru	ructions)
Technology Services BNSF Railway	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
02/15/2024 Wurtele, Gregory	
Contributor address; City; State; Zip Code	
Keller, TX 76244	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ructions)
Technology Services BNSF Railway	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
03/15/2024 Wurtele, Gregory	\$25.00
Contributor address; City; State; Zip Code	
Keller, TX 76244	
Principal occupation / Job title (See Instructions) Employer (See Instru	ructions)
Technology Services BNSF Railway	
) Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#: 04/15/2024 Wurtele, Gregory	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code	
Keller, TX 76244	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ructions)
Technology Services BNSF Railway	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/10	
2	FILER NAME KISD Family			3	Filer ID (Ethics Commission Filers) 00085714	
4	Date 05/15/2024	 5 Full name of contributor out-of-state PAC (ID#: Wurtele, Gregory 6 Contributor address; City; State; Zip Code Keller, TX 76244)	7	Amount of Contribution (\$) \$25.0	0
8	Principal occu Technology	pation / Job title (See Instructions)	9 Employer (See Instructions BNSF Railway	<u> </u> 5)		
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$) \$25.0	0
	Principal occu Technology	pation / Job title (See Instructions)	Employer (See Instructions BNSF Railway	<u> </u> 5)		_

SCHEDULE I

	1		1
Total pages Schedule I: Sch: 1/5 Rpt: 6/10	2 FILER NAME KISD Family Alliance		3 Filer ID (Ethics Commission Filers 00085714
Date 01/24/2024	5 Payee name Frost Bank		
Amount (\$) 35.00 Expenditure from corporate funds PURPOSE OF EXPENDITURE	 7 Payee Address; City; State; Zip 1240 Keller Pkwy Unit 100 Keller, TX 76248 (a) Category (See instructions for examples of acceptable categories) Accounting/Banking 	(b) Description Bank Fees	(See instructions regarding type of information required.
Date 01/29/2024	Payee name Frost Bank Payee Address; City; State; Zip		
Amount (\$) 35.00 Expenditure from corporate funds	Payee Address; City; State; Zip 1240 Keller Pkwy Unit 100 Keller, TX 76248		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description bank fees	(See instructions regarding type of information required.
Date 01/31/2024	Payee name Frost Bank		
Amount (\$) 15.00 Expenditure from corporate funds	Payee Address; City; State; Zip 1240 Keller Pkwy Unit 100 Keller, TX 76248		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description bank fees	(See instructions regarding type of information required.
Date 02/29/2024	Payee name Frost Bank	I	
Amount (\$) 15.00 Expenditure from corporate funds	Payee Address; City; State; Zip 1240 Keller Pkwy Unit 100 Keller, TX 76248		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description bank fees	(See instructions regarding type of information required.

SCHEDULE I

Total pages Schedule I:			2 Filer ID (Ethics Commission Filers
Sch: 2/5 Rpt: 7/10	2 FILER NAME KISD Family Alliance		3 Filer ID (Ethics Commission Filers 00085714
Date 03/29/2024	5 Payee name Frost Bank		
Amount (\$) 15.00 Expenditure from corporate funds PURPOSE OF	 7 Payee Address; City; State; Zip 1240 Keller Pkwy Unit 100 Keller, TX 76248 (a) Category (See instructions for examples of acceptable categories) Accounting/Banking 	(b) Description bank fees	(See instructions regarding type of information required.
EXPENDITURE			
Date 04/29/2024 Amount (\$)	Payee name Frost Bank Payee Address; City; State; Zip		
15.00 Expenditure from corporate funds	1240 Keller Pkwy Unit 100 Keller, TX 76248		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description bank fees	(See instructions regarding type of information required.
Date 05/29/2024	Payee name Frost Bank		
Amount (\$) 15.00 Expenditure from corporate funds	Payee Address; City; State; Zip 1240 Keller Pkwy Unit 100 Keller, TX 76248		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description bank fees	(See instructions regarding type of information required.
Date 06/29/2024	Payee name Frost Bank	1	
Amount (\$) 15.00 Expenditure from corporate funds	Payee Address; City; State; Zip 1240 Keller Pkwy Unit 100 Keller, TX 76248		
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description bank fees	(See instructions regarding type of information required.

SCHEDULE |

Sch: 3/5 Rpt: 8/10 Date 01/29/2024 Amount (\$) 47.97 Expenditure from corporate funds PURPOSE	KISD Family Alliance 5 Payee name Mailchimp 7 Payee Address; City; State; Zip 675 Ponce De Leon Ave NE	00085714
01/29/2024 Amount (\$) 47.97 Expenditure from corporate funds	Mailchimp 7 Payee Address; City; State; Zip	
47.97 Expenditure from corporate funds		
Expenditure from corporate funds	675 Ponce De Leon Ave NE	
Expenditure from corporate funds		
•	Atlanta, GA 30308	
		(b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Advertising Expense	Mail list fee
Date	Payee name	
01/16/2024	Revv	
Amount (\$)	Payee Address; City; State; Zip	
1.35	1100 K Street NW	
Expenditure from corporate funds	Washington, DC 20005	
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Fees	processing fee
Date	Payee name	
02/18/2024	Revv	
Amount (\$)	Payee Address; City; State; Zip	
1.35	1100 K Street NW	
Expenditure from corporate funds	Washington, DC 20005	
PURPOSE	(a) Category (See instructions for examples of acceptable categories)	(b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Fees	processing fee
Date	Payee name	
02/27/2024	Revv	
Amount (\$)	Payee Address; City; State; Zip	
25.31	1100 K Street NW	
Expenditure from	Washington, DC 20005	
_ corporate funds PURPOSE	-	(b) Description (See instructions regarding type of information required.
OF	Fees	processing fee

SCHEDULE |

	1	
Total pages Schedule I: Sch: 4/5 Rpt: 9/10	2 FILER NAME KISD Family Alliance	3 Filer ID (Ethics Commission Filers) 00085714
Date 03/17/2024	5 Payee name Revv	
Amount (\$) 1.35 – Expenditure from	7 Payee Address; City; State; Zip 1100 K Street NW	
corporate funds	Washington, DC 20005	r
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) processing fee
Date	Payee name	
04/16/2024	Revv	
Amount (\$) 1.35	Payee Address; City; State; Zip 1100 K Street NW	
Expenditure from corporate funds	Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) processing fee
Date		
05/15/2024	Payee name Revv	
Amount (\$) 1.35	Payee Address; City; State; Zip 1100 K Street NW	
Expenditure from corporate funds	Washington, DC 20005	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) processing fee
Date	Payee name	
06/18/2024	Revv	
Amount (\$) 1.35	Payee Address; City; State; Zip 1100 K Street NW	
1.00		
Expenditure from	Washington, DC 20005	
	-	(b) Description (See instructions regarding type of information required.)

The Instruction Guide explains how to complete this form. Total pages Schedule I: 2 FILER NAME Filer ID (Ethics Commission Filers) 1 3 **KISD** Family Alliance 00085714 Sch: 5/5 Rpt: 4 Date Payee name 5 01/18/2024 Wix.com Amount (\$) 7 Payee Address; City; State; Zip 6 500 Terry A Francois Blvd 181.86 Expenditure from San Francisco, CA 94158 corporate funds (a) Category (See instructions for examples of acceptable categories) 8 PURPOSE (b) Description (See instructions regarding type of information required.) OF EXPENDITURE Advertising Expense Web host fee

SCHEDULE |