

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00082064	2 Total pages filed: 19
3 COMMITTEE NAME Richardson Democrats		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 07/15/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 411 W. Lookout Dr. Richardson, TX 75080		
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
		Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mrs.	Wendy	
		NICKNAME	LAST SUFFIX
		Banul	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 411 W. Lookout Dr. Richardson, TX 75080		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 411 W. Lookout Dr. Richardson, TX 75080		
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		(469) 438-7370	
9 REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution (Attach PAC-DR)
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> 10th day after campaign treasurer termination
		<input type="checkbox"/> Runoff	
10 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
	01/01/2024		06/30/2024
11 ELECTION	ELECTION DATE	ELECTION TYPE	
	Month Day Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff <input type="checkbox"/> Other
		<input type="checkbox"/> General	<input type="checkbox"/> Special

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Richardson Democrats	13 Filer ID (Ethics Commission Filers) 00082064
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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)	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 550.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,415.54
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 4,692.41
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.

Mrs. Wendy Banul

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 Richardson Democrats		18 Filer ID (Ethics Commission Filers) 00082064
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 550.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
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 checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,415.54
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,361.74
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: 1/1 Rpt: 4/19
2 FILER NAME Richardson Democrats		3 Filer ID (Ethics Commission Filers) 00082064
4 Date 01/24/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Richardson, TX 75080	
8 Principal occupation / Job title (See Instructions) Real estate		9 Employer (See Instructions) Self
Date 04/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Diane	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code Richardson, TX 75080	
Principal occupation / Job title (See Instructions) IT Project Delivery Manager		Employer (See Instructions) Essilor USA

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 5/19

2 FILER NAME
Richardson Democrats

3 Filer ID (Ethics Commission Filers)
00082064

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 6/19
2 FILER NAME Richardson Democrats		3 Filer ID (Ethics Commission Filers) 00082064
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	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)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

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: 1/6 Rpt: 7/19	2 FILER NAME Richardson Democrats	3 Filer ID (Ethics Commission Filers) 00082064
4 Date 01/05/2024	5 Payee name Beyond the Slogan	
6 Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 5809 Sachse TX, TX 75098	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Texting Campaign - Get Out the Vote
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/28/2024	Payee name Communion	
Amount (\$) \$206.40 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 514 Lockwood Dr Richardson, TX 75080	
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 Happy Hour
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/18/2024	Payee name DCDA	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Dallas, TX	
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 Ad in DCDA congressional program
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 2/6 Rpt: 8/19	2 FILER NAME Richardson Democrats	3 Filer ID (Ethics Commission Filers) 00082064
4 Date 02/27/2024	5 Payee name Detrick Sommerville	
6 Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code TX	
8 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 Ad in Dem Program
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/10/2024	Payee name Edwards Signs	
Amount (\$) \$333.41 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Irving, TX	
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 Yard signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/16/2024	Payee name Four Bullets	
Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 640 N. Interurban St Richardson, TX 75080	
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 Happy Hour
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 3/6 Rpt: 9/19	2 FILER NAME Richardson Democrats	3 Filer ID (Ethics Commission Filers) 00082064
4 Date 02/16/2024	5 Payee name Four Bullets	
6 Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 640 N. Interurban St Richardson, TX 75080	
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 Happy Hour
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/25/2024	Payee name Four Bullets	
Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 640 N. Interurban St Richardson, TX 75080	
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 Happy Hour
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/27/2024	Payee name Four Bullets	
Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 640 N. Interurban St Richardson, TX 75080	
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 Happy Hour
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 4/6 Rpt: 10/19	2 FILER NAME Richardson Democrats	3 Filer ID (Ethics Commission Filers) 00082064
4 Date 06/21/2024	5 Payee name Four Bullets	
6 Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 640 N. Interurban St Richardson, TX 75080	
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 Happy Hour
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/20/2024	Payee name Industrial Pizza	
Amount (\$) \$25.73 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Richardson, TX 75081	
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 Happy Hour
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/21/2024	Payee name Pena, Meadow	
Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code UT Dallas Dallas, TX	
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 student meeting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 5/6 Rpt: 11/19	2 FILER NAME Richardson Democrats	3 Filer ID (Ethics Commission Filers) 00082064
4 Date 01/17/2024	5 Payee name Richardson Event Center	
6 Amount (\$) \$800.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1201 S Sherman St Suite 213 Richardso, TX 75081	
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 Panel
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/01/2024	Payee name Staycation	
Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 201 S Texas St Richardson, TX 75081	
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 Community and Coffee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/29/2024	Payee name Staycation	
Amount (\$) \$200.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 201 S Texas St Richardson, TX 75081	
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 Community and Coffee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 6/6 Rpt: 12/19	2 FILER NAME Richardson Democrats	3 Filer ID (Ethics Commission Filers) 00082064
4 Date 03/18/2024	5 Payee name TX32 Democrat	
6 Amount (\$) \$100.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code Richardson, TX 75080	
8 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 Richardson Democrat Ad for Program
	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: 1/7 Rpt:	2 FILER NAME Richardson Democrats	3 Filer ID (Ethics Commission Filers) 00082064
4 Date 01/23/2024	5 Payee name Adobe	
6 Amount (\$) 32.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Images and Forms	(b) Description (See instructions regarding type of information required.) Images and Forms
Date 02/23/2024	Payee name Adobe	
Amount (\$) 32.46 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip TX	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Images and Forms	(b) Description (See instructions regarding type of information required.) Images and Forms
Date 03/25/2024	Payee name Adobe	
Amount (\$) 32.46 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip TX	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Images and Forms	(b) Description (See instructions regarding type of information required.) Images and Forms
Date 04/23/2024	Payee name Adobe	
Amount (\$) 32.46 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip TX	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Images and Forms	(b) Description (See instructions regarding type of information required.) Images and Forms

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/7 Rpt:	2 FILER NAME Richardson Democrats	3 Filer ID (Ethics Commission Filers) 00082064
4 Date 05/23/2024	5 Payee name Adobe	
6 Amount (\$) 32.46 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Images and Forms	(b) Description (See instructions regarding type of information required.) Images and Forms
Date 06/24/2024	Payee name Adobe	
Amount (\$) 32.46 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip TX	
9 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Images and Forms	(b) Description (See instructions regarding type of information required.) Images and Forms
Date 01/25/2024	Payee name Amazon	
Amount (\$) 29.22 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 80218 Seattle, WA 98108	
10 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Paper	(b) Description (See instructions regarding type of information required.) Paper
Date 01/25/2024	Payee name Amazon	
Amount (\$) 29.22 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 80218 Seattle, WA 98108	
11 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Paper	(b) Description (See instructions regarding type of information required.) Paper

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/7 Rpt:	2 FILER NAME Richardson Democrats	3 Filer ID (Ethics Commission Filers) 00082064
4 Date 02/06/2024	5 Payee name Curry, Henry	
6 Amount (\$) 330.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Security
Date 05/02/2024	Payee name Google Domains	
Amount (\$) 12.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip TX	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Domain Name	(b) Description (See instructions regarding type of information required.) Domain Name
Date 05/13/2024	Payee name Google Domains	
Amount (\$) 6.40 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip TX	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Domain Name	(b) Description (See instructions regarding type of information required.) Domain Name
Date 05/20/2024	Payee name Google Domains	
Amount (\$) 69.86 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip TX	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Domain Name	(b) Description (See instructions regarding type of information required.) Domain Name

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 4/7 Rpt:	2 FILER NAME Richardson Democrats	3 Filer ID (Ethics Commission Filers) 00082064
4 Date 06/20/2024	5 Payee name Google Domains	
6 Amount (\$) 69.08 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Domain Name	(b) Description (See instructions regarding type of information required.) Domain Name
Date 02/26/2024	Payee name Office Depot	
Amount (\$) 92.21 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip TX	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Name Badges
Date 02/06/2024	Payee name Osborne, Preston	
Amount (\$) 156.96 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip Richardson, TX 75080	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Camera Equipment
Date 01/22/2024	Payee name Squarespace	
Amount (\$) 35.18 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 8 Clarkson St Manhattan, NY 10014	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Website	(b) Description (See instructions regarding type of information required.) ebsite

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 5/7 Rpt:		2 FILER NAME Richardson Democrats		3 Filer ID (Ethics Commission Filers) 00082064	
4 Date 02/21/2024		5 Payee name Squarespace			
6 Amount (\$) 35.18 <input type="checkbox"/> Expenditure from corporate funds		7 Payee Address; City; State; Zip 8 Clarkson St Manhattan, NY 10014			
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) website		(b) Description (See instructions regarding type of information required.) website	
Date 03/21/2024		Payee name Squarespace			
Amount (\$) 35.18 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 8 Clarkson St Manhattan, NY 10014			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) website		(b) Description (See instructions regarding type of information required.) website	
Date 04/22/2024		Payee name Squarespace			
Amount (\$) 35.18 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 8 Clarkson St Manhattan, NY 10014			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) website		(b) Description (See instructions regarding type of information required.) website	
Date 05/21/2024		Payee name Squarespace			
Amount (\$) 35.18 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 8 Clarkson St Manhattan, NY 10014			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) website		(b) Description (See instructions regarding type of information required.) website	

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 6/7 Rpt:	2 FILER NAME Richardson Democrats	3 Filer ID (Ethics Commission Filers) 00082064
4 Date 06/21/2024	5 Payee name Squarespace	
6 Amount (\$) 35.18 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 8 Clarkson St Manhattan, NY 10014	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) website	(b) Description (See instructions regarding type of information required.) website
Date 06/11/2024	Payee name Squarespace	
Amount (\$) 6.50 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 8 Clarkson St Manhattan, NY 10014	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) website	(b) Description (See instructions regarding type of information required.) Website
Date 01/23/2024	Payee name USPS	
Amount (\$) 104.35 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 433 Belle Grove Richardson, TX 75080	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Postage Stamps	(b) Description (See instructions regarding type of information required.) Postage Stamps
Date 01/22/2024	Payee name target	
Amount (\$) 35.18 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip TX	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Supplies	(b) Description (See instructions regarding type of information required.) Office Supplies - Notecards

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 7/7 Rpt:	2 FILER NAME Richardson Democrats	3 Filer ID (Ethics Commission Filers) 00082064
4 Date 02/16/2024	5 Payee name ups store	
6 Amount (\$) 4.54 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Shipping Supplies	(b) Description (See instructions regarding type of information required.) Shipping supplies
Date 02/27/2024	Payee name ups store	
Amount (\$) 5.19 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip TX	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Shipping Supplies	(b) Description (See instructions regarding type of information required.) Shipping Supplies
Date 04/29/2024	Payee name ups store	
Amount (\$) 5.19 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip TX	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Shipping Supplies	(b) Description (See instructions regarding type of information required.) Shipping Supplies