FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00080359 3 COMMITTEE NAME **OFFICE USE ONLY** The Texas State University System PAC Date Received **ELECTRONICALLY FILED** 07/15/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 1408 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78767 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Tom NAME NICKNAME LAST **SUFFIX** Spilman STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 823 Congress Ave., Ste. 1313 STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 823 Congress Ave., Ste. 1313 MAILING **ADDRESS** Austin, TX 78701 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 476-0697 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff Year 10 PERIOD Month Day Year Day Month **COVERED THROUGH** 02/25/2024 06/30/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

| 12 COMMITTEE NAME | | : | 13 Filer ID | (Ethics Commission Filers) |
|---|---|---|------------------|----------------------------|
| The Texas State Un | iversity System PAC | | 00080359 | |
| 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 Magauras | A. Supported | | |
| | Measures (Describe by date and location of election and nature of issue.) | A. Supported | | |
| | | B. Opposed | | |
| | | | | |
| | Officeholders Assisted | | | |
| | (Identify by name or, if applicable, classify by party.) | | | |
| 15 CONTRIBUTION TOTALS | PLEDGES, LOANS, CONTRIBUTIONS N | D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold | \$ | 0.00 |
| | | AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 17,908.40 |
| EXPENDITURE | ` | D POLITICAL EXPENDITURES | | |
| TOTALS | | | \$ | 0.00 |
| | 4. TOTAL POLITICA | L EXPENDITURES | \$ | 0.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL OF THE REPORTIN | CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD | DAY \$ | 53,086.86 |
| OUTSTANDING LOAN TOTALS | • | AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD | HE \$ | 0.00 |
| 16 AFFIDAVIT | | | <u> </u> | |
| | | I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code. | | |
| | | Mr Tom | Spilman | |
| | | Signature of Can | - | |
| AFFIX NOTA | ARY STAMP / SEAL ABOVE | | | |
| Sworn to and subscri | bed before me, by the said | , th | is the | day |
| of | , 20, to certify | which, witness my hand and seal of office. | | |
| | | | | |
| | | | | |
| Signature of office | r administering oath | Printed name of officer administering oath | Title of officer | administering oath |

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

| | | | ; | 3 of 18 |
|-----------------------|--|--------------|----------------------|----------|
| 17 COMMITT | EE NAME | 18 Filer ID | (Ethics Commission F | ilers) |
| The Texa | 00080359 | | | |
| 19 SCHEDUL NAME OF | SUBTOTAL AMO | TNUC | | |
| 1. X | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ 1 | 7,908.40 |
| 2. | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | |
| 3. | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ | |
| 4. | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION | DR | \$ | |
| 5. | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION | ATION OR | \$ | |
| 6. | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG | SANIZATION | \$ | |
| 7. | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | 2 | \$ | |
| 8. | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR | ORGANIZATION | \$ | |
| 9. | 9. SCHEDULE E: LOANS | | | |
| 10. | 10. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | | | |
| 11. | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | |
| 12. | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | ONS | \$ | |
| 13. | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | |
| 14. X | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | ONS | \$ | 634.06 |
| 15. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER | RETURNED | \$ | |
| | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A1 | | |
|---|----------------------------------|--|---|---|-------------|--|------------|--|
| | The Instru | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 1/7 Rpt: 4/18 | | |
| 2 | FILER NAME The Texas S | itate University System PAC | | | 3 | Filer ID (Ethics Commission 00080359 | on Filers) | |
| 4 | Date 05/02/2024 | 5 Full name of contributor Aswath, Pranesh6 Contributor address; City; St | out-of-state PAC (ID#:ate; Zip Code |) | 7 | Amount of Contribution (\$) | \$1,200.00 | |
| _ | 5 | Grapevine, TX 76051 | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | - | <u></u> | | | |
| 8 | Principal occu Provost | pation / Job title (See Instructions | 9 | Employer (See Instructions Texas State University | | | | |
| | Date 05/03/2024 | Full name of contributor Cowell, Ronnye Contributor address; City; St | |) | | Amount of Contribution (\$) | \$500.00 | |
| | Principal occu | Houston, TX 77024 pation / Job title (See Instructions |) | Employer (See Instructions | ;) | | | |
| | Retired | | | | | | | |
| | Date 05/05/2024 | Full name of contributor Doughtie, Lee Contributor address; City; St | out-of-state PAC (ID#: ate; Zip Code |) | | Amount of Contribution (\$) | \$250.00 | |
| | | Austin, TX 78703 | | | | | | |
| | Principal occu Retired | pation / Job title (See Instructions |) | Employer (See Instructions | 5) | | | |
| | Date 03/06/2024 | Full name of contributor Elmore, Wendy Contributor address; City; St. Athens, TX 75751 | |) | | Amount of Contribution (\$) | \$125.00 | |
| | Principal occu Provost | pation / Job title (See Instructions | | Employer (See Instructions | 5) | | | |
| | Date 03/26/2024 | Full name of contributor Elmore, Wendy Contributor address; City; St | | | | Amount of Contribution (\$) | \$125.00 | |
| | Principal occu Provost | pation / Job title (See Instructions | | Employer (See Instructions | 5) | | | |
| | | | - | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | | | | | SCHEDULE A | | |
|---|--|---|-------|-----------------------------------|--|--------------------------------------|------------|--|
| | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 2/7 Rpt: 5/18 | | | |
| 2 | FILER NAME The Texas S | itate University System PAC | | | 3 | Filer ID (Ethics Commission 00080359 | on Filers) | |
| 4 | Date 04/25/2024 | Full name of contributor | ` | | 7 | Amount of Contribution (\$) | \$125.00 | |
| _ | Dein sin al a sau | Athens, TX 75751 | - 10 | - Faralana (One hadrantian | | | | |
| 8 | Principal occu Provost | pation / Job title (See Instructions) | 9 | Employer (See Instructions | S) | | | |
| | Date 05/01/2024 | Full name of contributor out-of-state PAC Hall, Matthew Contributor address; City; State; Zip Code | | | • | Amount of Contribution (\$) | \$1,000.00 | |
| | Principal occu | San Marcos, TX 78666 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> s) | | | |
| | CIO | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | Texas State University | , | | | |
| | Date 05/06/2024 | Full name of contributor out-of-state PAC Harvey, Steve Contributor address; City; State; Zip Code | (ID#: | | | Amount of Contribution (\$) | \$500.00 | |
| | | Austin, TX 78734 | | | | | | |
| | Principal occu Financial Ad | pation / Job title (See Instructions) visor | | Employer (See Instructions | 5) | | | |
| | Date 03/06/2024 | Full name of contributor out-of-state PAC Hernandez, Cynthia Contributor address; City; State; Zip Code New Braunfels, TX 78130 | |) | | Amount of Contribution (\$) | \$100.00 | |
| | Principal occu Administrato | pation / Job title (See Instructions) r | | Employer (See Instructions TSU | 5) | | | |
| | Date Full name of contributor out-of-state PAC (ID#:) Hernandez, Cynthia Contributor address; City; State; Zip Code New Braunfels, TX 78130 | | • | Amount of Contribution (\$) | \$100.00 | | | |
| | Principal occu Administrato | pation / Job title (See Instructions) r | | Employer (See Instructions | 5) | | | |
| | | | • | | | | | |

| | MONEI | ARY POLITICAL CON | TRIBUTION | S | | SCHEDUL | E A1 |
|--|--|---|--------------------|---|----------|--|-------------|
| | The Instru | ction Guide explains how to co | mplete this form | m. | 1 | Total pages Schedule A1: Sch: 3/7 Rpt: 6/18 | |
| 2 | FILER NAME | tate University System PAC | | | 3 | Filer ID (Ethics Commission 00080359 | n Filers) |
| 4 | Date | | of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | |
| • | 04/17/2024 | Hernandez, Cynthia 6 Contributor address; City; State; Zip | | , | | Timodit of Contabation (C) | \$100.00 |
| _ | Dringing Loggy | New Braunfels, TX 78130 | lo. | Employer (Coo Instructions | | | |
| ð | Administrato | pation / Job title (See Instructions) r | 9 | Employer (See Instructions TSU |) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 05/21/2024 Hernandez, Cynthia Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$100.00 | | |
| | Delinational | New Braunfels, TX 78130 | <u> </u> | For all and (Constructions | | | |
| | Administrato | pation / Job title (See Instructions) r | | Employer (See Instructions TSU |) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 03/06/2024 Hull, Brooks Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$83.35 | | |
| | | San Marcos, TX 78666 | | | | | |
| | Principal occu Vice Preside | pation / Job title (See Instructions) nt | | Employer (See Instructions Texas State University |) | | |
| Date Full name of contributor out-of-state PAC (ID#:) 03/11/2024 Hull, Brooks Contributor address; City; State; Zip Code San Marcos, TX 78666 | | | | Amount of Contribution (\$) | \$83.35 | | |
| | Principal occu Vice Preside | pation / Job title (See Instructions) nt | | Employer (See Instructions Texas State University |) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 04/17/2024 Hull, Brooks Contributor address; City; State; Zip Code San Marcos, TX 78666 | | | Amount of Contribution (\$) | \$83.35 | | |
| | Principal occu Vice Preside | pation / Job title (See Instructions) nt | | Employer (See Instructions Texas State University |) | | |
| | | | <u>.</u> | | | | |

| | MONEI | ARY POLITICAL (| CONTRIBUTIO | NS | | SCHEDUL | E A1 |
|---|---|--|------------------------------|---|---|--|-------------|
| | The Instruc | ction Guide explains hov | v to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 4/7 Rpt: 7/18 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | The Texas S | State University System PAC | | | | 00080359 | |
| 4 | Date 04/30/2024 | 5 Full name of contributor Hull, Brooks6 Contributor address; City; S | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$83.35 |
| 8 | Principal occu | San Marcos, TX 78666 pation / Job title (See Instructions | 5) | Employer (See Instructions | <u> </u> | | |
| • | Vice Preside | | | Texas State University | -, | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 03/14/2024 Johnson, Thomas Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$250.00 | | |
| | | Bridge City, TX 77611 | | | Ĺ | | |
| | College Pres | pation / Job title (See Instructions | 5) | Employer (See Instructions Lamar State College | 5) | | |
| | | | | Lamar State College | _ | | |
| | Date 03/19/2024 | Full name of contributor Johnson, Thomas Contributor address; City; S | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$250.00 |
| | | Bridge City, TX 77611 | | | | | |
| | Principal occu | pation / Job title (See Instructions | 5) | Employer (See Instructions | <u> </u> | | |
| | College Pres | | , | Lamar State College | , | | |
| Date Full name of contributor out-of-state PAC (ID#:) Johnson, Thomas Contributor address; City; State; Zip Code Bridge City, TX 77611 | |) | | Amount of Contribution (\$) | \$250.00 | | |
| | Principal occu College Pres | pation / Job title (See Instructions | 5) | Employer (See Instructions Lamar State College | 5) | | |
| | Date | Full name of contributor | out-of-state PAC (ID#: | Lamai State College | | Amount of Contribution (\$) | |
| O5/06/2024 Johnson, Thomas Contributor address; City; State; Zip Code Bridge City, TX 77611 | | | y unount of Contribution (4) | \$250.00 | | | |
| | Principal occu College Pres | pation / Job title (See Instructions sident | 5) | Employer (See Instructions Lamar State College | s) | | |
| | | | | | | | |

| | MONEI | ARY POLITICAL (| CONTRIBUTIO | NS | | SCHEDULE A1 |
|---|--------------------------------|--|------------------------|--|----------------|--|
| | The Instruc | ction Guide explains hov | ı to complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 5/7 Rpt: 8/18 |
| 2 | FILER NAME The Texas S | state University System PAC | | | 3 | Filer ID (Ethics Commission Filers) 00080359 |
| 4 | | | 7 | Amount of Contribution (\$) \$1,000.00 | | |
| 8 | Principal occu Vice Preside | New Braunfels, TX 78132 pation / Job title (See Instructions | | 9 Employer (See Instructions Texas State University | 5) | |
| | Date 05/03/2024 | Full name of contributor Mann, Alan Contributor address; City; S | out-of-state PAC (ID#: | | | Amount of Contribution (\$) \$250.00 |
| | Principal occu Real Estate | Dallas, TX 75225 pation / Job title (See Instructions | s) | Employer (See Instructions Dunhill Partners | <u> </u> s) | |
| | Date 06/04/2024 | Full name of contributor McCall, Brian Contributor address; City; S | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) \$10,000.00 |
| | Principal occu Chancellor | Austin, TX 78703 pation / Job title (See Instructions | s) | Employer (See Instructions | <u> </u> s) | |
| | Date 03/06/2024 | Full name of contributor Pantlik, Sandra Contributor address; City; S Austin, TX 78745 | out-of-state PAC (ID#: |) | • | Amount of Contribution (\$) \$50.00 |
| | • | pation / Job title (See Instructions ce President | s) | Employer (See Instructions | 5) | |
| | Date 03/26/2024 | Full name of contributor Pantlik, Sandra Contributor address; City; S Austin, TX 78745 | out-of-state PAC (ID#: | | • | Amount of Contribution (\$) \$50.00 |
| | | pation / Job title (See Instructions ce President | 5) | Employer (See Instructions | 5) | |
| | | | | | | |

| | MONEI | ARY POLITICAL C | CONTRIBUTIO |)NS | | SCHEDUL | E A1 |
|---|---|---|--|------------------------------|--|-----------------------------|-------------|
| | The Instruction Guide explains how to complete this form. | | | 1 | Total pages Schedule A1: Sch: 6/7 Rpt: 9/18 | | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | n Filers) |
| | The Texas S | tate University System PAC | | | | 00080359 | |
| 4 | Date 04/25/2024 | | | 7 | Amount of Contribution (\$) | \$50.00 | |
| | | Austin, TX 78745 | | | | | |
| 8 | | pation / Job title (See Instructions |) | 9 Employer (See Instructions | 5) | | |
| | Associate Vi | ce President | | | | | |
| | Date 05/06/2024 | Full name of contributor Stephenson, Mike Contributor address; City; St | out-of-state PAC (ID#:_ ate; Zip Code | | | Amount of Contribution (\$) | \$500.00 |
| | | Conroe, TX 77304 | | | | | |
| | Principal occu | pation / Job title (See Instructions |) | Employer (See Instructions | <u></u> | | |
| | Provost | | | Sam Houston State Uni | ver | sity | |
| | Date 05/07/2024 | Full name of contributor Waechter, Michal Contributor address; City; St | out-of-state PAC (ID#:_ |) | | Amount of Contribution (\$) | \$50.00 |
| | | Boerne, TX 78006 | | | | | |
| | Principal occu | I pation / Job title (See Instructions |) | Employer (See Instructions | <u>L</u> 5) | | |
| | Consultant | | | Self | | | |
| Date Full name of contributor out-of-state PAC (ID#:) 03/06/2024 Webb, James Contributor address; City; State; Zip Code Kyle, TX 78640 | | | Amount of Contribution (\$) | \$100.00 | | | |
| | • | pation / Job title (See Instructions ce Chancellor |) | Employer (See Instructions | s) | | |
| Date Full name of contributor out-of-state PAC (ID#:) 03/26/2024 Webb, James Contributor address; City; State; Zip Code Kyle, TX 78640 | | | Amount of Contribution (\$) | \$100.00 | | | |
| | | pation / Job title (See Instructions ce Chancellor |) | Employer (See Instructions | 5) | | |
| | | | | | | | |

| | MONETARY POLITICAL CONTRIBUTIONS | SCHEDULE A1 |
|---|--|---|
| | The Instruction Guide explains how to complete this form. | 1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/18 |
| 2 | FILER NAME The Texas State University System PAC | 3 Filer ID (Ethics Commission Filers) 00080359 |
| 4 | | 7 Amount of Contribution (\$) \$100.00 |
| | Kyle, TX 78640 | |
| 8 | Principal occupation / Job title (See Instructions) Associate Vice Chancellor 9 Employer (See Instructions) | tions) |
| | Date Full name of contributor out-of-state PAC (ID#: |) Amount of Contribution (\$) \$100.00 |
| | Richards, TX 77873 | |
| | Principal occupation / Job title (See Instructions) Employer (See Instructions) Higher Ed Sam Houston State | |
| | | |
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|---|---|--|
| | The Instruction Guide explains how to | complete this form. |
| Total pages Schedule I: Sch: 1/8 Rpt: | FILER NAME The Texas State University System PAC | 3 Filer ID (Ethics Commission Filers) 00080359 |
| 4 Date | 5 Payee name | I |
| 03/06/2024 | Rally.org | |
| 6 Amount (\$) | 7 Payee Address; City; State; Zip | |
| 6.88 | 995 Market St. | |
| Expenditure from | 2nd Floor | |
| corporate funds | San Francisco, CA 94105 | |
| 8 PURPOSE OF | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) |
| EXPENDITURE | rees | Processing Fee |
| | | |
| Date | Payee name | |
| 03/06/2024 | Rally.org | |
| Amount (\$) | Payee Address; City; State; Zip | |
| 8.20 | 995 Market St. | |
| Expenditure from corporate funds | 2nd Floor San Francisco, CA 94105 | |
| PURPOSE | | (b) Description (See instructions regarding type of information required.) |
| OF | Fees | Processing Fee |
| EXPENDITURE | | - |
| | | |
| Date | Payee name | |
| 03/06/2024 | Rally.org | |
| Amount (\$) | Payee Address; City; State; Zip | |
| 10.18 | 995 Market St. 2nd Floor | |
| Expenditure from corporate funds | San Francisco, CA 94105 | |
| PURPOSE | | (b) Description (See instructions regarding type of information required.) |
| OF | Fees | Processing Fee |
| EXPENDITURE | | |
| | | |
| Date | Payee name | |
| 03/06/2024 | Rally.org | |
| Amount (\$) | Payee Address; City; State; Zip | |
| 8.20 | 995 Market St. 2nd Floor | |
| Expenditure from corporate funds | San Francisco, CA 94105 | |
| PURPOSE | | (b) Description (See instructions regarding type of information required.) |
| OF | Fees | Processing Fee |
| EXPENDITURE | | |
| | | |
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| | The Instruction Guide explains how to complete this form. | | | | |
|--|--|--|--|--|--|
| Total pages Schedule I: Sch: 2/8 Rpt: | FILER NAME The Texas State University System PAC | 3 Filer ID (Ethics Commission Filers) 00080359 | | | |
| 4 Date 03/06/2024 | 5 Payee name Rally.org | | | | |
| 4.25 Expenditure from corporate funds PURPOSE OF EXPENDITURE | 7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105 (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Processing Fee | | | |
| Date 03/11/2024 | Payee name Rally.org | | | | |
| Amount (\$) 6.88 Expenditure from corporate funds | Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105 | | | | |
| 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 03/14/2024 | Payee name Rally.org | | | | |
| Amount (\$) 20.05 Expenditure from corporate funds | Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105 | | | | |
| 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 03/19/2024 | Payee name Rally.org | | | | |
| Amount (\$) 20.05 Expenditure from corporate funds | Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105 | | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Processing Fee | | | |
| | | | | | |

| | The Instruction Guide explains how to | complete this form. |
|---|--|--|
| Total pages Schedule I: Sch: 3/8 Rpt: | FILER NAME The Texas State University System PAC | 3 Filer ID (Ethics Commission Filers) 00080359 |
| 4 Date | 5 Payee name | 30000000 |
| 03/19/2024 | Rally.org | |
| 6 Amount (\$) | 7 Payee Address; City; State; Zip | |
| 8.20 | 995 Market St. | |
| Expenditure from | 2nd Floor | |
| corporate funds | San Francisco, CA 94105 | |
| 8 PURPOSE OF | | (b) Description (See instructions regarding type of information required.) |
| EXPENDITURE | Fees | Processing Fee |
| | | |
| Date | Payee name | |
| 03/26/2024 | Rally.org | |
| Amount (\$) | Payee Address; City; State; Zip | |
| 10.18 | 995 Market St. | |
| Expenditure from | 2nd Floor | |
| corporate funds PURPOSE | San Francisco, CA 94105 (a) Category (See instructions for examples of acceptable categories) | (b) Description (See instructions regarding type of information required.) |
| OF | Fees | (b) Description (See instructions regarding type of information required.) Processing Fee |
| EXPENDITURE | | 3 |
| | | |
| Date | Payee name | |
| 03/26/2024 | Rally.org | |
| Amount (\$) | Payee Address; City; State; Zip | |
| 8.20 | 995 Market St. 2nd Floor | |
| Expenditure from corporate funds | San Francisco, CA 94105 | |
| PURPOSE | (a) Category (See instructions for examples of acceptable categories) | (b) Description (See instructions regarding type of information required.) |
| OF | Fees | Processing Fee |
| EXPENDITURE | | - |
| | | |
| Date | Payee name | |
| 03/26/2024 | Rally.org | |
| Amount (\$) | Payee Address; City; State; Zip | |
| 4.25 | 995 Market St. 2nd Floor | |
| Expenditure from corporate funds | San Francisco, CA 94105 | |
| PURPOSE | | (b) Description (See instructions regarding type of information required.) |
| OF | Fees | Processing Fee |
| EXPENDITURE | | |
| | | |
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| | | |

| The Instruction Guide explains how to complete this form. | | |
|---|--|--|
| 1 Total pages Schedule I: | 2 FILER NAME The Texas State University System PAC | 3 Filer ID (Ethics Commission Filers) 00080359 |
| Sch: 4/8 Rpt: 4 Date | 5 Payee name | 00080339 |
| 4 Date 04/17/2024 | Rally.org | |
| | | |
| 6 Amount (\$) | 7 Payee Address; City; State; Zip 995 Market St. | |
| 6.88 | 2nd Floor | |
| Expenditure from corporate funds | San Francisco, CA 94105 | |
| 8 PURPOSE | (a) Category (See instructions for examples of acceptable categories) | Description (See instructions regarding type of information required.) |
| OF EXPENDITURE | Fees | Processing Fee |
| EXI ENDITORE | | |
| | | |
| Date | Payee name | |
| 04/17/2024 | Rally.org | |
| Amount (\$) | Payee Address; City; State; Zip | |
| 20.05 | 995 Market St. | |
| Expenditure from | 2nd Floor San Francisco, CA 94105 | |
| corporate funds | | |
| PURPOSE OF | (a) Category (See instructions for examples of acceptable categories) (b) Fees | Description (See instructions regarding type of information required.) Processing Fee |
| EXPENDITURE | 1 003 | Frocessing Fee |
| | | |
| Date | Payee name | |
| 04/17/2024 | Rally.org | |
| Amount (\$) | Payee Address; City; State; Zip | |
| 8,20 | 995 Market St. | |
| Expenditure from | 2nd Floor | |
| corporate funds | San Francisco, CA 94105 | |
| PURPOSE | (a) Category (See instructions for examples of acceptable categories) | |
| OF EXPENDITURE | Fees | Processing Fee |
| | | |
| 5. | | |
| Date | Payee name | |
| 04/25/2024 | Rally.org | |
| Amount (\$) | Payee Address; City; State; Zip | |
| 10.18 | 995 Market St. | |
| Expenditure from | 2nd Floor San Francisco, CA 94105 | |
| corporate funds | | Description (See instructions regarding type of information required.) |
| PURPOSE OF | Fees | Description (See instructions regarding type of information required.) Processing Fee |
| EXPENDITURE | | 1 Toccssing i ee |
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| The Instruction Guide explains how to complete this form. | | | |
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| 1 Total pages Schedule I: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) | |
| Sch: 5/8 Rpt: | The Texas State University System PAC | 00080359 | |
| 4 Date | 5 Payee name | • | |
| 04/25/2024 | Rally.org | | |
| 6 Amount (\$) | 7 Payee Address; City; State; Zip | | |
| 8.20 | 995 Market St. | | |
| Expenditure from | 2nd Floor | | |
| corporate funds | San Francisco, CA 94105 | | |
| 8 PURPOSE | (a) Category (See instructions for examples of acceptable categories) | · | |
| OF EXPENDITURE | Fees | Processing Fee | |
| | | | |
| Date | Payee name | | |
| 04/25/2024 | Rally.org | | |
| Amount (\$) | Payee Address; City; State; Zip | | |
| 4.25 | 995 Market St. | | |
| Expenditure from | 2nd Floor | | |
| corporate funds | San Francisco, CA 94105 | | |
| PURPOSE OF | | (b) Description (See instructions regarding type of information required.) | |
| EXPENDITURE | Fees | Processing Fee | |
| | | | |
| Date | Payee name | | |
| 04/30/2024 | Rally.org | | |
| Amount (\$) | Payee Address; City; State; Zip | | |
| 6.88 | 995 Market St. | | |
| Expenditure from | 2nd Floor | | |
| corporate funds | San Francisco, CA 94105 | | |
| PURPOSE OF | (a) Category (See instructions for examples of acceptable categories) | (b) Description (See instructions regarding type of information required.) | |
| EXPENDITURE | Fees | Processing Fee | |
| | | | |
| Date | Payee name | | |
| 05/01/2024 | Rally.org | | |
| Amount (\$) | Payee Address; City; State; Zip | | |
| 79.30 | 995 Market St. | | |
| Expenditure from | 2nd Floor | | |
| corporate funds | San Francisco, CA 94105 | | |
| PURPOSE | (a) Category (See instructions for examples of acceptable categories) | | |
| OF EXPENDITURE | Fees | Processing Fee | |
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| | The Instruction Guide explains how to | complete this form. | |
|---------------------------|---|--|--|
| 1 Total pages Schedule I: | 2 FILER NAME | 3 Filer ID (Ethics Commission Filers) | |
| Sch: 6/8 Rpt: | The Texas State University System PAC | 00080359 | |
| 4 Date | 5 Payee name | | |
| 05/02/2024 | Rally.org | | |
| 6 Amount (\$) | 7 Payee Address; City; State; Zip | | |
| 95.10 | 995 Market St. | | |
| Expenditure from | 2nd Floor | | |
| corporate funds | San Francisco, CA 94105 | (1) | |
| 8 PURPOSE OF | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Processing Fee | |
| EXPENDITURE | | 1 Toccasing Fee | |
| | | | |
| Date | Payee name | | |
| 05/02/2024 | Rally.org | | |
| Amount (\$) | Payee Address; City; State; Zip | | |
| 79.30 | 995 Market St. | | |
| Expenditure from | 2nd Floor | | |
| corporate funds | San Francisco, CA 94105 | | |
| PURPOSE OF | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Processing Fee | |
| EXPENDITURE | 1 003 | Frocessing Fee | |
| | | | |
| Date | Payee name | | |
| 05/03/2024 | Rally.org | | |
| Amount (\$) | Payee Address; City; State; Zip | | |
| 20.05 | 995 Market St. | | |
| Expenditure from | 2nd Floor | | |
| corporate funds | San Francisco, CA 94105 | (b) December (See instructions regarding time of information required) | |
| PURPOSE OF | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Processing Fee | |
| EXPENDITURE | | 1100000011191100 | |
| | | | |
| Date | Payee name | | |
| 05/03/2024 | Rally.org | | |
| Amount (\$) | Payee Address; City; State; Zip | | |
| 39.80 | 995 Market St. | | |
| Expenditure from | 2nd Floor | | |
| corporate funds | San Francisco, CA 94105 | | |
| PURPOSE OF | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) | |
| EXPENDITURE | rees | Processing Fee | |
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| The Instruction Guide explains how to complete this form. | | | | |
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| Total pages Schedule I: Sch: 7/8 Rpt: | FILER NAME The Texas State University System PAC | 3 Filer ID (Ethics Commission Filers) 00080359 | | |
| 4 Date 05/05/2024 | 5 Payee name Rally.org | • | | |
| 6 Amount (\$) 20.05 Expenditure from corporate funds 8 PURPOSE OF EXPENDITURE | 7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105 (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Processing Fee | | |
| Date 05/06/2024 | Payee name Rally.org | | | |
| Amount (\$) 39.80 Expenditure from corporate funds | Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105 | | | |
| 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 05/06/2024 | Payee name Rally.org | | | |
| Amount (\$) 39.80 Expenditure from corporate funds | Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105 | | | |
| 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 05/06/2024 | Payee name Rally.org | | | |
| Amount (\$) 20.05 Expenditure from corporate funds | Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105 | | | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Processing Fee | | |
| | | | | |

| The Instruction Guide explains how to complete this form. | | | |
|---|---|--|--|
| 1 Total pages Schedule I: Sch: 8/8 Rpt: | 2 FILER NAME The Texas State University System PAC | 3 Filer ID (Ethics Commission Filers) 00080359 | |
| 4 Date 05/07/2024 | 5 Payee name Rally.org | | |
| 8.20 Expenditure from corporate funds | 7 Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105 | | |
| 8 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 05/07/2024 | Payee name Rally.org | | |
| Amount (\$) 4.25 Expenditure from corporate funds | Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105 | | |
| 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 05/21/2024 | Payee name Rally.org | | |
| Amount (\$) 8.20 Expenditure from corporate funds | Payee Address; City; State; Zip 995 Market St. 2nd Floor San Francisco, CA 94105 | | |
| PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Fees | (b) Description (See instructions regarding type of information required.) Processing Fee | |
| | | | |