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) 00065303 3 COMMITTEE NAME **OFFICE USE ONLY** New American PAC Date Received **ELECTRONICALLY FILED** 07/15/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1111 W. Mockingbird Ln Date Hand-delivered or Date Postmarked **Suite 1200** Change of Address Dallas, TX 75247 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Fernando NAME NICKNAME LAST **SUFFIX** Dubove STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1111 W. Mockingbird Ln STREET **ADDRESS** Suite 1200 (Residence or Business) Dallas, TX 75247 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1111 W. Mockingbird Ln MAILING **ADDRESS Suite 1200** Dallas, TX 75247 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 941-8300 x132 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 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2024 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 | er ID (Ethics Commission Filers) |
|---|----------------------------------|
| New American PAC 000 | 065303 |
| 14 COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported Mrs. Kathleen Hicks Tarrant County | Commissioners Court Precinct |
| (Attach lists on plain paper to complete this report if necessary.) B. Opposed | |
| 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.) | |
| 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 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) | \$ 8,500.00 |
| EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS | \$ 0.00 |
| 4. TOTAL POLITICAL EXPENDITURES | \$ 10,500.00 |
| CONTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |
| OUTSTANDING 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, the true and correct and includes all information under Title 15, Election Code. | |
| Mr. Fernando Du | ubove |
| 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 | e of officer administering oath |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC **ADDENDUM**

| | | | | | Page 3 of 9 |
|---|---|--------------|-----------------------|-------------------------|----------------------------|
| 12 COMMITTEE NAME | | | | 13 Filer ID | (Ethics Commission Filers) |
| New American PAC | | | | 00065303 | |
| 14 COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | Mr. Lupe Valdez Dalla | as County Sheriff | |
| (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.) | | | | |
| COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | Miss Ariela Martinez(| Castleberry Independent | School District, Place 3 |
| (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.) | | | | |
| | | | | | |

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3 4 of 9

| | | | | 4 of 9 |
|---|---|-------------------|--------------------|-----------|
| TOMMIT | TTEE NAME | 18 Filer ID | (Ethics Commission | n Filers) |
| New An | nerican PAC | 00065303 | | |
| | ULE SUBTOTALS OF SCHEDULE | | SUBTOTAL / | AMOUNT |
| 1. X | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ | 8,500.00 |
| 2. X | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | S | \$ | 0.00 |
| 3. X | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ | 0.00 |
| 4. | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OF ORGANIZATION | R LABOR | \$ | |
| 5. | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM COLABOR ORGANIZATION | RPORATION OR | \$ | |
| 6. | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABO | R ORGANIZATION | \$ | |
| 7. | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR ORGANIZATION | LABOR | \$ | |
| 8. | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR L | ABOR ORGANIZATION | \$ | |
| 9. X | SCHEDULE E: LOANS | | \$ | 0.00 |
| 10. X | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIB | BUTIONS | \$ | 10,500.00 |
| 11. X | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | 0.00 |
| 12. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | | | \$ | 0.00 |
| 13. X | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | 0.00 |
| 14. | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTI | RIBUTIONS | \$ | |
| 15. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTO FILER | TIONS RETURNED | \$ | |

| | MONET | ARY POLITICAL CONTRIBUTIO | NS | | SCHEDU | LE A1 |
|---|---|---|---|-----------------------------|---|--------------|
| | The Instru | ction Guide explains how to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 1/1 Rpt: 5/9 | |
| 2 | FILER NAME New Americ | | | 3 | Filer ID (Ethics Commiss 00065303 | ion Filers) |
| 4 | Date 03/29/2024 5 Full name of contributor out-of-state PAC (ID#:) Garcia, Domingo (Mr.) 6 Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$5,000.00 | |
| | Deimainal | Dallas, TX 75208 | O Frankrian (Cook lastination | | | |
| 8 | Attorney | ipation / Job title (See Instructions) | 9 Employer (See Instructions Law office of Domingo (| | cia | |
| | Date 04/09/2024 | Full name of contributor out-of-state PAC (ID#: Garcia, Domingo (Mr.) Contributor address; City; State; Zip Code | | | Amount of Contribution (\$) | \$2,500.00 |
| | | Dallas, TX 75208 upation / Job title (See Instructions) | Employer (See Instructions | | | |
| | Attorney | Full name of contributor ut-of-state PAC (ID#: | Law office of Domingo (| Gar | Amount of Contribution (\$) | |
| | 04/24/2024 | SNelson Law PLLC Contributor address; City; State; Zip Code | | | | \$1,000.00 |
| | | Dallas, TX 75206 | | | | |
| | Principal occu | ıpation / Job title (See Instructions) | Employer (See Instructions | ıs) | | |
| | | | | | | |

| PLE | DGED CONTRIBU | TIONS | | | SCHEDULE | В |
|---|------------------------------------|-----------------------|---------------------|---------|---|---------|
| The Instruction Guide explains how to complete this form. | | | | 1 | Total pages Schedule B: Sch: 1/1 Rpt: 6/9 | |
| 2 FILER N | AME Jerican PAC | | | 3 | | |
| | OF UNITEMIZED PLED | GES | | + | \$ | 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 Cod | e | | Chack if traval autida of Tayan Complete Cab | odulo T |
| 10 Principal | occupation / Job title (See Instru | uctions) | 11 Employer (See In | structi | Check if travel outside of Texas. Complete Schoons) | edule I |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| | LOANS | | | | | SC | HEDULE E |
|----|------------------------------------|-----------------------------------|-------------------|------------------------------|------------|------------------------------------|-----------------|
| | The Instruction | on Guide explains how t | o complete this f | orm. | 1 | pages Schedule 1/1 Rpt: 7/9 | E: |
| | FILER NAME New American F | PAC | | | 3 Filer I | D (Ethics Com | mission Filers) |
| 4 | TOTAL OF UN | IITEMIZED LOANS | | | | \$ | 0.00 |
| 5 | Date of loan | 7 Name of lender | out-of-state PA | C (ID#: | | 9 Loan Amo | ount (\$) |
| | Is lender a financial institution? | 8 Lender address; Cit | sy; State; | Zip Code | | 10 Interest R | |
| | | | | | | 11 Maturity D | Pate |
| 12 | Principal occupation | on / Job title (See Instructions) | | 13 Employer (See Instruction | ıs) | • | |
| 14 | Description of Coll None | ateral | | 15 Check if personal funds w | ere deposi | ted into political a (See Instr | |
| | GUARANTOR INFORMATION | 17 Name of guarantor | | | | 19 Amount G | Suaranteed (\$) |
| | not applicable | 18 Guarantor address; Cit | y; State; | Zip Code | | | |
| | | | | | | | |
| 20 | Principal occupation | on | | 21 Employer (See Instruction | ıs) | l | |
| | | | | | | | |

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 Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

| Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | |
|--|--|
| 1 Total pages Schedule F1: | |
| Sch: 1/2 Rpt: 8/9 | New American PAC 00065303 |
| • | New American PAC 00005505 |
| 4 Date | 5 Payee name |
| 02/07/2024 | Hicks, Kathleen (Miss) |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,000.00 | P O Box 15922 |
| | |
| Expenditure from | Fort Worth TV 76110 |
| corporate funds | Fort Worth, TX 76119 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| | Candidate/Officeholder/Political Committee |
| | Kathleen Hicks for Tarrant County |
| | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/Oi | |
| Date | Payee name |
| 03/25/2024 | Lupe, Valdez (Mr.) |
| | |
| Amount (\$) | |
| \$5,000.00 | 711 N Edgefield Ave, |
| Expenditure from | |
| corporate funds | Dallas, TX 75208 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Candidate/Officeholder/Political Committee |
| | Lupe Valdez Sheriff Campaign |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | - 1 |
| Date | Douge name |
| 04/08/2024 | Payee name Lupe, Valdez (Mr.) |
| 04/08/2024 | Lupe, valuez (ivir.) |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$2,500.00 | 711 N Edgefield Ave, |
| | |
| Expenditure from corporate funds | Dallas, TX 75208 |
| PURPOSE | |
| OF | |
| EXPENDITURE | Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Lupe Valdez Sheriff Campaign |
| | |
| Complete <u>ONLY</u> if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| | |
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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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

| Candidate/Officeholder/Politica Credit Card Payment | |
|---|---|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 2/2 Rpt: 9/9 | New American PAC 00065303 |
| 4 Date | 5 Payee name |
| 04/24/2024 | Lupe, Valdez (Mr.) |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,000.00 | 711 N Edgefield Ave, |
| | |
| Expenditure from corporate funds | Dallas, TX 75208 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Candidate/Officeholder/Political Committee |
| | Eupe valuez Shemi Gampaign |
| 9 Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Date | Payee name |
| 05/02/2024 | Martinez, Ariela (Miss) |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$1,000.00 | 4513 Ohio Garden Rd |
| Expenditure from | |
| corporate funds | Fort Worth, TX 76114 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Contributions/Donations Made By |
| | Candidate/Officeholder/Political Committee |
| | Ariela Martinez for Castleberry ISD Campaign for May 4, 2024 |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | |
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