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) 00082403 3 COMMITTEE NAME **OFFICE USE ONLY** The Black Women's PAC Date Received **ELECTRONICALLY FILED** 07/15/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 122072 Date Hand-delivered or Date Postmarked Change of Address Arlington, TX 76012 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Jean NAME NICKNAME LAST **SUFFIX** Coleman STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 6912 River Park Lane N. #412 STREET **ADDRESS** (Residence or Business) Fort Worth, TX 76116 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 6912 River Park Lane N. #412 MAILING **ADDRESS** Fort Worth, TX 76116 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (682) 330-2092 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** 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

| 2 COMMITTEE NAME | | 1 | 3 Filer ID | (Ethics Commission Filers) |
|---|---|--|----------------|----------------------------|
| The Black Women's | PAC | | 00082403 | , |
| 4 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 | A. Supported | | |
| | (Describe by date and location of election and nature of issue.) | | | |
| | | B. Opposed | | |
| | Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | |
| 5 CONTRIBUTION TOTALS | PLEDGES, LOANS, CONTRIBUTIONS | D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) t qualifies for the higher itemization threshold | \$ | 1,148.40 |
| | | AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 2,296.80 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZE | D POLITICAL EXPENDITURES | \$ | 2,981.20 |
| | 4. TOTAL POLITICA | AL EXPENDITURES | \$ | 2,981.20 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL OF THE REPORTIN | CONTRIBUTIONS MAINTAINED AS OF THE LAST DIG PERIOD | PAY \$ | 5,034.31 |
| OUTSTANDING LOAN TOTALS | • | AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD | HE \$ | 0.00 |
| 6 AFFIDAVIT | | | <u> </u> | |
| | | I swear, or affirm, under penalty of perj true and correct and includes all inform under Title 15, Election Code. | | |
| | | | | |
| | | Ms. Jean | | |
| | | Signature of Cam | ipaign i reasi | urer |
| AFFIX NOTA | RY STAMP / SEAL ABOVE | | | |
| Sworn to and subscrib | oed before me, by the said _ | , thi | s 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 offi | cer administering oath |

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3 3 of 16

| | | | 3 of 16 |
|--|---|--|---|
| EE NAME | 18 Filer ID | (Ethics Commissi | on Filers) |
| k Women's PAC | 00082403 | | |
| | | SUBTOTAL | AMOUNT |
| SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ | 2,296.80 |
| SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | 0.00 |
| SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ | 0.00 |
| SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION | DR | \$ | |
| SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION | ATION OR | \$ | |
| SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG | SANIZATION | \$ | |
| SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | ? | \$ | |
| SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR | ORGANIZATION | \$ | |
| SCHEDULE E: LOANS | | \$ | 0.00 |
| SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | S | \$ | 2,981.20 |
| SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | 0.00 |
| SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI | ONS | \$ | 0.00 |
| SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | 0.00 |
| SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI | ONS | \$ | |
| SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER | RETURNED | \$ | |
| | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS | R Women's PAC E SUBTOTALS E SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED | R WOMEN'S PAC JESUBTOTALS SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS RETURNED |

| | MONET | ARY POLITICAL CONTR | RIBUTION | S | | SCHEDULE | ■ A1 |
|--------------------|------------------------|--|-----------------|---------------------------------|---|---|-------------|
| | The Instruc | ction Guide explains how to comp | olete this form | n. | 1 | Total pages Schedule A1: Sch: 1/11 Rpt: 4/16 | |
| 2 | FILER NAME The Black W | omen's PAC | | | 3 | Filer ID (Ethics Commission 00082403 | ı Filers) |
| 4 | Date 01/04/2024 | Full name of contributor out-of-si Adams, Victoria A Contributor address; City; State; Zip Contributor city; State; Zip Contributor | |) | 7 | Amount of Contribution (\$) | \$50.00 |
| | | Fort Worth, TX 76109 | | | | | |
| 8 | Principal occu none | pation / Job title (See Instructions) | 9 | Employer (See Instructions none | 5) | | |
| | Date 02/04/2024 | Full name of contributor out-of-si Adams, Victoria A Contributor address; City; State; Zip Co | tate PAC (ID#: | | | Amount of Contribution (\$) | \$50.00 |
| | Dringinal occu | Fort Worth, TX 76109 pation / Job title (See Instructions) | | Employer (See Instructions | -/- | | |
| | none | pation / Job title (See Instructions) | | none | ·) | | |
| | Date 03/04/2024 | Full name of contributor out-of-si Adams, Victoria A Contributor address; City; State; Zip Co | tate PAC (ID#: |) | • | Amount of Contribution (\$) | \$50.00 |
| | | Fort Worth, TX 76109 | | | | | |
| | Principal occu none | pation / Job title (See Instructions) | | Employer (See Instructions none | 5) | | |
| Date 04/04/2024 | | Adams, Victoria A | | | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions none | <u> </u> | | |
| | Date 05/04/2024 | Full name of contributor out-of-si Adams, Victoria A Contributor address; City; State; Zip Co Fort Worth, TX 76109 | tate PAC (ID#: |) | | Amount of Contribution (\$) | \$50.00 |
| | Principal occu none | pation / Job title (See Instructions) | | Employer (See Instructions none | 5) | | |
| | | | • | | | | |

| | MONEI | ARY POLITICAL (| CONTRIBUTIO | INS | | SCHEDULI | E A1 |
|---|-----------------------------|---|-------------------------|---|-----------|---|-------------|
| | The Instru | ction Guide explains how | to complete this fo | orm. | 1 | Total pages Schedule A1: Sch: 2/11 Rpt: 5/16 | |
| 2 | FILER NAME | | | | 3 | Filer ID (Ethics Commission | Filers) |
| | The Black W | /omen's PAC | | | L | 00082403 | |
| 4 | Date 06/04/2024 | 5 Full name of contributor Adams, Victoria A6 Contributor address; City; S | out-of-state PAC (ID#:_ | | 7 | Amount of Contribution (\$) | \$50.00 |
| 8 | Principal occu | Fort Worth, TX 76109 pation / Job title (See Instructions | 5) | 9 Employer (See Instruction: | <u>s)</u> | | |
| Ü | none | pation / Job title (Jee mandenons | , | none | 3) | | |
| | Date 01/21/2024 | Full name of contributor Greene, Diane Contributor address; City; S | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$21.00 |
| | | Austin, TX 78725 | | | | | |
| | Principal occu Therapist | pation / Job title (See Instructions | s) | Employer (See Instructions Self employed | s) | | |
| | Date 02/21/2024 | Full name of contributor Greene, Diane Contributor address; City; S | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$21.00 |
| | | Austin, TX 78725 | | | | | |
| | • | pation / Job title (See Instructions | 6) | Employer (See Instruction | s) | | |
| | Therapist | | | Self employed | | | |
| | Date 03/21/2024 | Full name of contributor Greene, Diane Contributor address; City; S | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$21.00 |
| | | Austin, TX 78725 | | | <u> </u> | | |
| | Therapist | pation / Job title (See Instructions | 5) | Employer (See Instruction: Self employed | s) | | |
| | Date 04/21/2024 | Full name of contributor Greene, Diane Contributor address; City; S Austin, TX 78725 | out-of-state PAC (ID#:_ | | | Amount of Contribution (\$) | \$21.00 |
| | Principal occu Therapist | pation / Job title (See Instructions | 5) | Employer (See Instruction: Self employed | s) | | |
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| | MONET | ARY POLITICAL CONTRIB | BUTION | IS | | SCHEDULI | E A1 |
|--------------------|------------------------|---|------------|--|----------------|---|-------------|
| | The Instruc | ction Guide explains how to complet | e this for | n. | 1 | Total pages Schedule A1: Sch: 3/11 Rpt: 6/16 | |
| 2 | FILER NAME The Black W | omen's PAC | | | 3 | Filer ID (Ethics Commission 00082403 | ı Filers) |
| 4 | Date 05/21/2024 | Full name of contributor | , |) | 7 | Amount of Contribution (\$) | \$21.00 |
| _ | 5 | Austin, TX 78725 | - la | 5 1 (0 1 1 1 | _ | | |
| 8 | Therapist | pation / Job title (See Instructions) | 9 | Employer (See Instructions Self employed | 5) | | |
| | Date 06/21/2024 | Full name of contributor out-of-state F Greene, Diane Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$21.00 |
| | Dringing agg | Austin, TX 78725 | | Employer (See Instructions | ·/ | | |
| | Therapist | pation / Job title (See Instructions) | | Self employed | ·) | | |
| | Date 01/25/2024 | Full name of contributor out-of-state Figwe, Eric Contributor address; City; State; Zip Code | PAC (ID#: |) | | Amount of Contribution (\$) | \$25.00 |
| | | Fort Worth, TX 76137 | | | | | |
| | | pation / Job title (See Instructions) ock 4 Project Manager | | Employer (See Instructions Lockheed Martin | s) | | |
| Date 02/25/2024 | | Full name of contributor out-of-state F Igwe, Eric Contributor address; City; State; Zip Code Fort Worth, TX 76137 | |) | | Amount of Contribution (\$) | \$25.00 |
| | • | pation / Job title (See Instructions) ock 4 Project Manager | | Employer (See Instructions Lockheed Martin | <u> </u> 5) | | |
| | Date 03/25/2024 | Full name of contributor out-of-state Figwe, Eric Contributor address; City; State; Zip Code Fort Worth, TX 76137 | |) | | Amount of Contribution (\$) | \$25.00 |
| | | pation / Job title (See Instructions) ock 4 Project Manager | | Employer (See Instructions Lockheed Martin | 5) | | |
| | 23.3 | | | 3233 | | | |

| | MONEI | ARY POLITICAL CO | ONTRIBUTIO | NS | | SCHEDULE | A1 |
|--------------------|--|--|---|---|--------|---|-----------|
| | The Instru | ction Guide explains how to | o complete this fo | rm. | 1 | Total pages Schedule A1: Sch: 4/11 Rpt: 7/16 | |
| 2 | FILER NAME The Black W | omen's PAC | | | 3 | Filer ID (Ethics Commission 00082403 | Filers) |
| 4 | Date 04/25/2024 | 5 Full name of contributor | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$25.00 |
| 8 | | Fort Worth, TX 76137 pation / Job title (See Instructions) ock 4 Project Manager | g | Employer (See Instructions Lockheed Martin | i) | | |
| | Date 05/25/2024 | Full name of contributor Igwe, Eric Contributor address; City; State Fort Worth, TX 76137 | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$25.00 |
| | Principal occupation / Job title (See Instructions) F-35 FoM Block 4 Project Manager | | Employer (See Instructions Lockheed Martin | <u> </u> ;) | | | |
| | Date 06/25/2024 | Full name of contributor Igwe, Eric Contributor address; City; State | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$25.00 |
| | | Fort Worth, TX 76137 | | | L | | |
| | | pation / Job title (See Instructions) ock 4 Project Manager | | Employer (See Instructions Lockheed Martin | 5) | | |
| Date 01/25/2024 | | Full name of contributor Masco, Raquel Contributor address; City; State Bryan, TX 77807 | out-of-state PAC (ID#: e; Zip Code | | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu Nonprofit Ma | pation / Job title (See Instructions) | | Employer (See Instructions Brazos Valley Center go | | ndependent Living | |
| | Date 02/25/2024 | Full name of contributor Masco, Raquel Contributor address; City; State Bryan, TX 77807 | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$25.00 |
| | Principal occu Nonprofit Ma | pation / Job title (See Instructions) anagement | | Employer (See Instructions Brazos Valley Center go | | ndependent Living | |
| | | | | | | | |

| | MONEI | ARY POLITICAL COI | VIRIBUTION | IS | | SCHEDULE | A1 |
|---|--------------------|---|------------------------------------|----------------------------|------------------|--|-----------|
| | The Instru | ction Guide explains how to o | complete this for | m. | ı | Total pages Schedule A1: Sch: 5/11 Rpt: 8/16 | |
| 2 | FILER NAME | 4 I. B40 | | | ı | Filer ID (Ethics Commission | Filers) |
| | | /omen's PAC | | | Ь— | 00082403 | |
| 4 | Date 03/25/2024 | Full name of contributor | out-of-state PAC (ID#: |) | 7 | Amount of Contribution (\$) | \$25.00 |
| | | Bryan, TX 77807 | | | | | |
| 8 | Principal occu | pation / Job title (See Instructions) | 9 | Employer (See Instructions | <u></u> s) | | |
| | Nonprofit Ma | anagement | | Brazos Valley Center go | ot In | dependent Living | |
| | Date 04/25/2024 | Masco, Raquel Contributor address; City; State; 2 | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$25.00 |
| | | Bryan, TX 77807 | | | | | |
| | | pation / Job title (See Instructions) | | Employer (See Instructions | | de la contraction de | |
| | | | Brazos Valley Center go | ot In | dependent Living | | |
| | Date 03/06/2024 | Full name of contributor | out-of-state PAC (ID#: Zip Code | | | Amount of Contribution (\$) | \$25.00 |
| | | Desoto, TX 75115 | | | | | |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Self employe | ed | | Debrah North | | | |
| | Date 01/25/2024 | Full name of contributor contributor contributor address; City; State; Zincolonia, TX 75243 | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Educational | Diagnostician | | Irving ISD | | | |
| | Date 02/25/2024 | Full name of contributor | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions | 5) | | |
| | Educational | Diagnostician | | Irving ISD | | | |
| | | | | | | | |

| | MONEI | ARY POLITICAL C | ONTRIBUTION | NS | | SCHEDULI | A1 |
|---|---------------------------|---|--|---------------------------------------|----------------|---|-----------|
| | The Instru | ction Guide explains how | to complete this for | m. | 1 | Total pages Schedule A1: Sch: 6/11 Rpt: 9/16 | |
| 2 | FILER NAME The Black W | /omen's PAC | | | 3 | Filer ID (Ethics Commission 00082403 | Filers) |
| 4 | Date 03/25/2024 | 5 Full name of contributor [Orr, Angela6 Contributor address; City; Sta | out-of-state PAC (ID#: te; Zip Code |) | 7 | Amount of Contribution (\$) | \$10.00 |
| 8 | | Dallas, TX 75243 pation / Job title (See Instructions) Diagnostician | 9 | Employer (See Instructions Irving ISD | <u> </u> s) | | |
| | Date 04/25/2024 | Full name of contributor Orr, Angela Contributor address; City; Sta Dallas, TX 75243 | out-of-state PAC (ID#: te; Zip Code |) | | Amount of Contribution (\$) | \$10.00 |
| | | pation / Job title (See Instructions) Diagnostician | | Employer (See Instructions Irving ISD | <u> </u> | | |
| | Date 05/25/2024 | Full name of contributor Orr, Angela Contributor address; City; Sta | out-of-state PAC (ID#: te; Zip Code |) | | Amount of Contribution (\$) | \$10.00 |
| | Dringing aggr | Dallas, TX 75243 pation / Job title (See Instructions) | | Employer (See Instructions | <u>,,</u> | | |
| | | Diagnostician | | Irving ISD | >) | | |
| | Date 06/25/2024 | Full name of contributor [Orr, Angela Contributor address; City; Sta Dallas, TX 75243 | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$10.00 |
| | | pation / Job title (See Instructions) Diagnostician | | Employer (See Instructions Irving ISD | 5) | | |
| | Date 01/30/2024 | Full name of contributor [Roberts, Vera Contributor address; City; Sta Fort Worth, TX 76119 | out-of-state PAC (ID#: |) | • | Amount of Contribution (\$) | \$20.20 |
| | Principal occu none | pation / Job title (See Instructions) | | Employer (See Instructions none | 5) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | Ν | IS | | SCHEDULE | A1 |
|---|---|---|-----|---------------------------------|----------------|--|-----------|
| | The Instruc | ction Guide explains how to complete this f | orı | m. | 1 | Total pages Schedule A1: Sch: 7/11 Rpt: 10/16 | |
| 2 | FILER NAME The Black W | omen's PAC | | | 3 | Filer ID (Ethics Commission 00082403 | Filers) |
| 4 | Date 02/29/2024 | Full name of contributor | | | 7 | Amount of Contribution (\$) | \$20.20 |
| _ | | Fort Worth, TX 76119 | _ | | | | |
| 8 | none | pation / Job title (See Instructions) | 9 | Employer (See Instructions none | 5) | | |
| | Date 03/30/2024 | Full name of contributor | | | | Amount of Contribution (\$) | \$20.20 |
| | Dringing age | Fort Worth, TX 76119 | _ | Employer (See Instructions | <u></u> | | |
| | none | pation / Job title (See Instructions) | | Employer (See Instructions none | 5) | | |
| | Date 04/30/2024 | Full name of contributor out-of-state PAC (ID#:_ Roberts, Vera Contributor address; City; State; Zip Code | |) | | Amount of Contribution (\$) | \$20.20 |
| | | Fort Worth, TX 76119 | | | | | |
| | Principal occu none | pation / Job title (See Instructions) | | Employer (See Instructions none | 5) | | |
| | Date Full name of contributor out-of-state PAC (05/30/2024 Roberts, Vera Contributor address; City; State; Zip Code | | |) | • | Amount of Contribution (\$) | \$20.20 |
| | Principal occu | Fort Worth, TX 76119 pation / Job title (See Instructions) | | Employer (See Instructions none | <u> </u> s) | | |
| | Date 06/30/2024 | Full name of contributor out-of-state PAC (ID#:_Roberts, Vera Contributor address; City; State; Zip Code Fort Worth, TX 76119 | | | | Amount of Contribution (\$) | \$20.20 |
| | Principal occu | pation / Job title (See Instructions) | | Employer (See Instructions none | 5) | | |
| | | | · | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDULE | E A1 |
|---|----------------------------|--|---------------------------------------|---|--|-------------|
| | The Instru | ction Guide explains how to complete this f | orm. | 1 | Total pages Schedule A1: Sch: 8/11 Rpt: 11/16 | |
| 2 | FILER NAME The Black W | /omen's PAC | | 3 | Filer ID (Ethics Commission 00082403 | ı Filers) |
| 4 | Date 01/03/2024 | 5 Full name of contributor out-of-state PAC (ID#:_ Rogers, Cheryl 6 Contributor address; City; State; Zip Code |) | 7 | Amount of Contribution (\$) | \$20.20 |
| _ | <u> </u> | Fort Worth, TX 76112 | | | | |
| 8 | Principal occu Educator | pation / Job title (See Instructions) | 9 Employer (See Instructions) ILTEXAS |) | | |
| | Date 02/03/2024 | Full name of contributor |) | | Amount of Contribution (\$) | \$20.20 |
| | Daine in all account | Fort WOrth, TX 76112 | Farely (Contracting) | | | |
| | Educator | pation / Job title (See Instructions) | Employer (See Instructions) ILTEXAS |) | | |
| | Date 03/03/2024 | Full name of contributor out-of-state PAC (ID#:_ Rogers, Cheryl Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$20.20 |
| | | Fort WOrth, TX 76112 | | | | |
| | Principal occu Educator | pation / Job title (See Instructions) | Employer (See Instructions) |) | | |
| | Date 04/03/2024 | Full name of contributor out-of-state PAC (ID#:_ Rogers, Cheryl Contributor address; City; State; Zip Code Fort WOrth, TX 76112 | | | Amount of Contribution (\$) | \$20.20 |
| | Principal occu Educator | pation / Job title (See Instructions) | Employer (See Instructions |) | | |
| | Date 05/03/2024 | Full name of contributor out-of-state PAC (ID#:_ Rogers, Cheryl Contributor address; City; State; Zip Code Fort WOrth, TX 76112 |) | | Amount of Contribution (\$) | \$20.20 |
| | Principal occu Educator | pation / Job title (See Instructions) | Employer (See Instructions ILTEXAS |) | | |
| | | | | | | |

| | MONET | ARY POLITICAL CO | NTRIBUTION | S | | SCHEDULE | ■ A1 |
|--------------------|--|--|------------------------|---|------------|--|-------------|
| | The Instruc | ction Guide explains how to | complete this form | n. | 1 | Total pages Schedule A1: Sch: 9/11 Rpt: 12/16 | |
| 2 | FILER NAME The Black W | omen's PAC | | | 3 | Filer ID (Ethics Commission 00082403 | ı Filers) |
| 4 | Date 06/03/2024 | Rogers, Cheryl | out-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$20.20 |
| _ | | Fort WOrth, TX 76112 | 10 | | | | |
| 8 | Principal occu Educator | pation / Job title (See Instructions) | | Employer (See Instructions ILTEXAS | <u></u> | | |
| | Date 01/21/2024 | Full name of contributor Urbin, Salustra Contributor address; City; State; | |) | | Amount of Contribution (\$) | \$10.00 |
| | Delicalization | Brentwood, CA 94513 | | Frankrija (Cook kooking | | | |
| | Principal occupation / Job title (See Instructions) biomedical Scientist | | | Employer (See Instructions lawrence livermore lab | 5) | | |
| | Date 02/21/2024 | Full name of contributor Urbin, Salustra Contributor address; City; State; | out-of-state PAC (ID#: | | | Amount of Contribution (\$) | \$10.00 |
| | | Brentwood, CA 94513 | | | | | |
| | Principal occu biomedical S | pation / Job title (See Instructions) Scientist | | Employer (See Instructions lawrence livermore lab | 5) | | |
| Date 03/21/2024 | | Urbin, Salustra Contributor address; City; State; | | | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu biomedical S | Brentwood, CA 94513 pation / Job title (See Instructions) Scientist | | Employer (See Instructions lawrence livermore lab | <u>;</u>) | | |
| | Date 04/21/2024 | Urbin, Salustra | out-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu biomedical S | pation / Job title (See Instructions) | | Employer (See Instructions lawrence livermore lab | () | | |
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| | MONET | ARY POLITICAL CON | NTRIBUTION | S | | SCHEDULE | ■ A1 |
|--------------------|--|---|-----------------------|---|------------|---|-------------|
| | The Instruc | ction Guide explains how to c | complete this form | n. | 1 | Total pages Schedule A1: Sch: 10/11 Rpt: 13/16 | |
| 2 | FILER NAME The Black W | omen's PAC | | | 3 | Filer ID (Ethics Commission 00082403 | ı Filers) |
| 4 | Date 05/21/2024 | Urbin, Salustra | ut-of-state PAC (ID#: | | 7 | Amount of Contribution (\$) | \$10.00 |
| 8 | Principal occur | Brentwood, CA 94513 pation / Job title (See Instructions) | l _a | Employer (See Instructions | | | |
| 0 | biomedical S | | 9 | lawrence livermore lab | ') | | |
| | Date 06/21/2024 | Full name of contributor of contributor of contributor address; City; State; Z | ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$10.00 |
| | | Brentwood, CA 94513 | | | | | |
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| | Date Full name of contributor out-of-state PAC (ID#: | | of state DAC (ID) | iawience liverinore lab | | Amount of Contribution (\$) | |
| | 01/28/2024 | Wilkinson, Caroline Contributor address; City; State; Z | | , | | , another of Contained alon (c) | \$10.00 |
| | | Houston, TX 77009 | | | | | |
| | Principal occu Sales | pation / Job title (See Instructions) | | Employer (See Instructions Schlumberger | 5) | | |
| Date 02/28/2024 | | Wilkinson, Caroline Contributor address; City; State; Z | ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu Sales | Houston, TX 77009 pation / Job title (See Instructions) | | Employer (See Instructions Schlumberger | 5) | | |
| | Date 03/28/2024 | Full name of contributor of wilkinson, Caroline Contributor address; City; State; Zity; State; | ut-of-state PAC (ID#: |) | | Amount of Contribution (\$) | \$10.00 |
| | Principal occu Sales | pation / Job title (See Instructions) | | Employer (See Instructions Schlumberger | i) | | |
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| | MONET | ARY POLITICAL CONTRIBUTION | ONS | | SCHEDUL | E A1 | |
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| | The Instru | ction Guide explains how to complete this f | 1 | Total pages Schedule A1: Sch: 11/11 Rpt: 14/16 | | | |
| 2 | FILER NAME The Black W | /omen's PAC | | 3 | n Filers) | | |
| 4 | Date 04/28/2024 | Full name of contributor | 7 | Amount of Contribution (\$) | \$10.00 | | |
| | | Houston, TX 77009 | | | | | |
| 8 | Principal occu Sales | ipation / Job title (See Instructions) | 9 Employer (See Instructions Schlumberger | S) | | | |
| | Date 05/28/2024 | Full name of contributor out-of-state PAC (ID#: Wilkinson, Caroline Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$10.00 | |
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| | Sales | pation / Job title (See Instructions) | Employer (See Instructions Schlumberger | S) | | | |
| | Date 06/28/2024 | Full name of contributor out-of-state PAC (ID#: Wilkinson, Caroline Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$10.00 | |
| | | Houston, TX 77009 | | | | | |
| | Principal occu Sales | ıpation / Job title (See Instructions) | Employer (See Instructions Schlumberger | s) | | | |
| | Date 01/06/2024 | Full name of contributor out-of-state PAC (ID#:_Yvars, Jamie Contributor address; City; State; Zip Code Chesterton, IN 46304 |) | • | Amount of Contribution (\$) | \$25.00 | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions Not Employed | <u>I</u> S) | | | |
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| PLEI | DGED CONTRIBU | TIONS | | | SCHEDULE | В | | |
|-----------------|--|-----------------------|--|---------|--|----------|--|--|
| Т | he Instruction Guide exp | 1 | Total pages Schedule B: Sch: 1/1 Rpt: 15/16 | | | | | |
| 2 FILER N | AME ck Women's PAC | | | 3 | Filer ID (Ethics Commission Filers) 00082403 | | | |
| | OF UNITEMIZED PLEDO | GES | | | \$ | 0.00 | | |
| 5 Date | 6 Full name of pledgor 7 Pledgor Address; | out-of-state PAC (ID: | | 8 | Amount of pledge (\$) | | | |
| 40 Daire dia al | | ordina A | | [| Check if travel outside of Texas. Complete Sci | hedule T | | |
| 10 Principai | occupation / Job title (See Instru | ctions) | 11 Employer (See In | structi | ions) | | | |
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| LOA | ANS | | | | | | | so | CHEDULE | E |
|--------------------------------|---|------------------------------|---------|----------|---|--|---|-------------|---------------|------|
| The Ir | The Instruction Guide explains how to complete this form. | | | | 1 | 1 Total pages Schedule E: Sch: 1/1 Rpt: 16/16 | | | | |
| | FILER NAME The Black Women's PAC | | | | 3 Filer ID (Ethics Co 00082403 | | | | nmission File | ers) |
| 4 TOTA | TOTAL OF UNITEMIZED LOANS | | | | | | | \$ | | 0.00 |
| 5 Date of | loan | 7 Name of lender | out-of- | state PA | C (ID#: | |) | 9 Loan An | nount (\$) | |
| 6 Is lende financia institutio | al | 8 Lender address; | City; S | State; | Zip Code | | | 10 Interest | | |
| | | | | | | | | 11 Maturity | Date | |
| 12 Principa | al occupation | on / Job title (See Instruct | ons) | | 13 Employer (See Instructions) | | | | | |
| | Description of Collateral None | | | | 15 Check if personal funds were deposited into political account (See Instructions) | | | | | |
| 16 GUARA | ANTOR MATION | 17 Name of guarantor | | | | | | 19 Amount | Guaranteed | (\$) |
| not | applicable | 18 Guarantor address; | | State; | Zip Code | | | | | |
| | | | | | | | | | | |
| 20 Principa | al occupation | on | | | 21 Employer (See Ins | tructions) | | | | |
| | | | | | | | | | | |