#### GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00086587	2 Total pages filed: 5	
3	COMMITTEE NAME			OFFICE USE ONLY	
	Technology Netwo	rk Texas PAC		Date Received	
		1		10/01/2024	
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CIT	TY; STATE; ZIP CODE		
	ADDRE35	20 Park Road, Ste. E		Date Hand-delivered or Date Postmarked	
	Change of Address				
		Burlingame, CA 94010		Receipt # Amount	
				Date Processed	
				Date Imaged	
5	CAMPAIGN	MS / MRS / MR FIRST		MI	
	TREASURER NAME	Mr. Russell H.			
		NICKNAME LAST		SUFFIX	
		Miller			
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODE	
	TREASURER	20 Park Road, Ste. E			
	STREET ADDRESS				
	(Residence or Business)	Burlingama CA 04010			
L		Burlingame , CA 94010			
ľ	CAMPAIGN TREASURER	STREET OR PO BOX;	APT / SUITE #; CITY	; STATE; ZIP CODE	
	MAILING	20 Park Road, Ste. E			
	ADDRESS				
	Change of Address	Burlingame , CA 94010			
8	CAMPAIGN	AREA CODE PHONE NUMBER E	EXTENSION		
ľ	TREASURER	(650) 401-8735	EXTENSION		
	PHONE	(050) 401-8755			
9	REPORT			-	
ľ	TYPE	January 15 X 30	Oth day before election	Dissolution (Attach PAC-DR)	
		8th	h day before election	10th day after campaign treasurer	
		July 15	unoff	termination	
10	PERIOD	Month Day Year	Month Day	Year	
	COVERED	07/01/2024 TH	HROUGH 09/26/202	4	
11	ELECTION	ELECTION DATE	ELECTION TYPE		
			Primary Runoff	Other	
		11/05/2024	General Special		
$\vdash$		I			
	GO TO PAGE 2				
Foi	rms provided by Te	xas Ethics Commission www.et	thics.state.tx.us	Version V4.1.0.48da51f7	

#### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Technology Network Texas PAC 000			00086587	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported The Honorable John Bucy III S	State Repres	entative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	4,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	0.00
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			•	
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.				
	Mr. Russell H. Miller Signature of Campaign Treasurer			
		Signature of Ca	וויףמושור דופלא	
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed before me, by the said day				
of, 20, to certify which, witness my hand and seal of office.				
Signature of officer adr	ninistering oath	Printed name of officer administering oath	Title of offi	cer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.48da51f7

### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

### FORM GPAC

Page 3 of 5

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Technology Network Te	exas PAC			00086587	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Tan Parker State Senator		
(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			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supported	Giovanni Capriglione State Re	presentative	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				

SUBTOTALS - GPAC		FORM GPAC
	CC	OVER SHEET PG 3 4 of 5
17 COMMITTEE NAME Technology Network Texas PAC	18 Filer ID 00086587	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	DR	\$
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9. SCHEDULE E: LOANS		\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 4,500.00
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

A durantizione Transmon	EXPENDITURE CATEGORIES FOR BOX 8(a)	
Advertising Expense Accounting/Banking	Event Expense         Loan Repayment/Reimbursement         Solicitation/Fundraising Expense           Fees         Office Overhead/Rental Expense         Transportation Equipment & Related Expense           Food/Beverage Expense         Polling Expense         Travel in District	
Consulting Expense Contributions/ Donations Made By	- Gift/Awards/Memorials Expense Printing Expense Travel Out of District	
Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.	
<b>1</b> Total pages Schedule F1:	· · ·	
1 0		
Sch: 1/1 Rpt: 5/5		
4 Date	5 Payee name	
09/23/2024	Giovanni Capriglione Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$2,000.00	P.O. Box 92007	
Expenditure from corporate funds	Southlake, TX 76092	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Contributions/Donations Made By	
EXPENDITURE	Candidate/Officeholder/Political Committee	
	Campaign Contribution	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	1	
Date	Payee name	
08/16/2024	John Bucy Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	PO Box 536	
Expenditure from corporate funds	Austin, TX 78767	
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 Vavel outside of Texas. Complete Schedule T.	
	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Political Contribution	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Data		
Date 09/23/2024	Payee name	
	Tan Parker Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,000.00	PO Box 271741	
Expenditure from corporate funds	Flower Mound, TX 75027-1741	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Contributions/Donations Made By	
EXPENDITURE	Candidate/Officeholder/Political Committee	
	Campaign Contribution	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		