

# CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

<b>1</b> Filer ID (Ethics Commission Filers) 00066791	<b>2</b> Total pages filed: 10	<b>OFFICE USE ONLY</b>	
<b>3</b> COMMITTEE NAME Texas Democratic Veterans Caucus	Date Received <b>ELECTRONICALLY FILED 08/26/2024</b>		
<b>4</b> TREASURER NAME Applewhaite, John O. (Mr.)	Date Hand-delivered or Date Postmarked		
<b>5</b> ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	Receipt #
	<input type="checkbox"/> July 15	<input type="checkbox"/> 10th day after campaign treasurer resignation	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution report	Date Processed
	<input type="checkbox"/> 8th day before election	<input checked="" type="checkbox"/> Other (specify) <u>September 5</u>	Date Imaged
<b>6</b> ORIGINAL PERIOD COVERED	Month    Day    Year 07/26/2024	THROUGH	Month    Day    Year 08/25/2024

**7 EXPLANATION OF CORRECTION**  
I forgot to add the second Account.

**8 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

**Semiannual reports:** I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

**Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mr. John O. Applewhaite  
\_\_\_\_\_  
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

**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**



# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Texas Democratic Veterans Caucus	<b>13 Filer ID</b> (Ethics Commission Filers) 00066791
--	---

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Ms. Kamala Harris President
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ 173.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 0.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 7,089.01
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 200.00

**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. John O. Applewhaite  
\_\_\_\_\_  
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

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

Page 4 of 10

<b>12 COMMITTEE NAME</b> Texas Democratic Veterans Caucus		<b>13 Filer ID</b> (Ethics Commission Filers) 00066791
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Rep. Colin Allred US Senator  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Ms. Marquette Greene-Scott Texas Congressional District 22  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Mr. Ernest R Lineberger US Representative District 26  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**  
ADDENDUM

Page 5 of 10

<b>12 COMMITTEE NAME</b> Texas Democratic Veterans Caucus		<b>13 Filer ID</b> (Ethics Commission Filers) 00066791
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Ms. Laura Jones US Representative District 8
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# SUBTOTALS - MPAC

<b>17 COMMITTEE NAME</b> Texas Democratic Veterans Caucus		<b>18 Filer ID</b> (Ethics Commission Filers) 00066791
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 173.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
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 type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 461.99
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/2 Rpt: 7/10
<b>2</b> FILER NAME Texas Democratic Veterans Caucus		<b>3</b> Filer ID (Ethics Commission Filers) 00066791
<b>4</b> Date 08/19/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Applewhaite, John <hr/> <b>6</b> Contributor address; City; State; Zip Code  Georgetown, TX 78628	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) N/A
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bethel, Paulette <hr/> Contributor address; City; State; Zip Code  Kaawa, HI 96730	Amount of Contribution (\$)  \$16.00
Principal occupation / Job title (See Instructions) Coach		Employer (See Instructions) Self
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) CHESTER, THOR <hr/> Contributor address; City; State; Zip Code  Victoria, TX 77901-2411	Amount of Contribution (\$)  \$16.00
Principal occupation / Job title (See Instructions) business owner		Employer (See Instructions) Thor Chester
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chism, Crystal <hr/> Contributor address; City; State; Zip Code  DeSoto, TX 75115	Amount of Contribution (\$)  \$16.00
Principal occupation / Job title (See Instructions) Job		Employer (See Instructions) Have One
Date 08/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Greene, Mark <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76133	Amount of Contribution (\$)  \$57.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Shawn M Cowdin Construction

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/2 Rpt: 8/10
<b>2</b> FILER NAME Texas Democratic Veterans Caucus		<b>3</b> Filer ID (Ethics Commission Filers) 00066791
<b>4</b> Date 08/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Markley, John	<b>7</b> Amount of Contribution (\$)  \$16.00
<b>6</b> Contributor address; City; State; Zip Code  Norfolk, VA 23505		
<b>8</b> Principal occupation / Job title (See Instructions) Military Officer		<b>9</b> Employer (See Instructions) US Navy
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olsson, donna	Amount of Contribution (\$)  \$16.00
Contributor address; City; State; Zip Code  Austin, TX 78727		
Principal occupation / Job title (See Instructions) Nurse/PT		Employer (See Instructions) Self employed
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Prado, Bessie	Amount of Contribution (\$)  \$16.00
Contributor address; City; State; Zip Code  San Antonio, TX 78228		
Principal occupation / Job title (See Instructions) Registered nurse		Employer (See Instructions) Alamo Colleges



# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 1/2 Rpt: 9/10	<b>2</b> FILER NAME Texas Democratic Veterans Caucus	<b>3</b> Filer ID (Ethics Commission Filers) 00066791
<b>4</b> Date 08/25/2024	<b>5</b> Payee name ActBlue LLC.	
<b>6</b> Amount (\$) 6.89 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 14 Arrow Street Suite 11 Cambridge, MA 02138	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) Membership Expence
Date 08/20/2024	Payee name Designer Graphics	
Amount (\$) 396.55 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 12404 Hyw 55 S Tyler, TX 75703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Printing Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Lapel Pins
Date 08/02/2024	Payee name Google Inc	
Amount (\$) 12.79 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1600 Amphitheatre Parkway Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Data	<b>(b)</b> Description (See instructions regarding type of information required.) Data Cloud Expence
Date 08/12/2024	Payee name Mail Chimp	
Amount (\$) 28.25 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 675 Ponce De Leon Ave NE Suite 5000 Atlanta , GA 30308	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Mail Chimp	<b>(b)</b> Description (See instructions regarding type of information required.) Mass Mailing Service

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 2/2 Rpt:	<b>2</b> FILER NAME Texas Democratic Veterans Caucus	<b>3</b> Filer ID (Ethics Commission Filers) 00066791
<b>4</b> Date 08/14/2024	<b>5</b> Payee name The Mail Drop	
<b>6</b> Amount (\$) 17.51 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 2970 Williams Dr. Georgetown, TX 78628	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Fees	<b>(b)</b> Description (See instructions regarding type of information required.) Mail Expencce