#### 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) 00058072 3 COMMITTEE NAME **OFFICE USE ONLY** Sun City Democrats Club Date Received **ELECTRONICALLY FILED** 10/24/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1530 Sun City Blvd., STE120 Date Hand-delivered or Date Postmarked PMB 432 Change of Address Georgetown, TX 78633 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Cammie NAME NICKNAME LAST **SUFFIX** Wait STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 901 Rio Grande Loop STREET **ADDRESS** (Residence or Business) Georgetown, TX 78633 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 901 Rio Grande Loop MAILING **ADDRESS** Georgetown, TX 78633 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 553-6790 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 09/27/2024 10/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ 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) |
|---|---|--|-----------------|----------------------------|
| Sun City Democrats Cl   | ub  |  | 00058072        |                            |
| 14 COMMITTEE<br>ACTIVITY  | Candidates (Identify by name or, if applicable, classify by party.)                     | A. Supported Maggie Ellis Court Of Appeals   | s, Justice      |                            |
| (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   |                 |                            |
|   | Officeholders     Assisted     (Identify by name or, if applicable, classify by party.) |  |                 |                            |
| <b>15</b> CONTRIBUTION<br>TOTALS                                    | PLEDGES, LOANS, CONTRIBUTIONS M check here if this report                               | D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold | \$              | 0.00                       |
|   | 2. TOTAL POLITICA<br>(OTHER THAN PLE  | L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)   | \$              | 1,173.00                   |
| EXPENDITURE<br>TOTALS   | 3. TOTAL UNITEMIZED   | POLITICAL EXPENDITURES   | \$              | 0.00                       |
|   | 4. TOTAL POLITICA   | \$   | 4,000.00        |                            |
| CONTRIBUTION<br>BALANCE   | 5. TOTAL POLITICAL (<br>OF THE REPORTIN   | CONTRIBUTIONS MAINTAINED AS OF THE LAST<br>G PERIOD  | DAY \$          | 10,773.68                  |
| OUTSTANDING<br>LOAN TOTALS  |   | AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD   | THE \$          | 0.00                       |
| 16 AFFIDAVIT  | I   |  | <u> </u>        |                            |
|   |   | I swear, or affirm, under penalty of per<br>true and correct and includes all infor<br>under Title 15, Election Code.                |                 |                            |
|   |   | Ms. Cai  | mmie Wait       |                            |
|   |   | Signature of Ca  | ampaign Treasur | rer                        |
| AFFIX NOTARY  | / STAMP / SEAL ABOVE  |  |                 |                            |
| Sworn to and subscribed   | d before me, by the said  | ,1   | this the        | day                        |
|   |   | which, witness my hand and seal of office.   |                 |                            |
|   |   |  |                 |                            |
| Signature of officer ad   | dministering oath   | Printed name of officer administering oath   | Title of offic  | er administering oath      |

#### **GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE**

### FORM GPAC **ADDENDUM**

|   |   |              |               |              | ī           | Page 3 of 17               |
|---|---|--------------|---------------|--------------|-------------|----------------------------|
| 12 COMMITTEE NAME   |   |              |               |              | 13 Filer ID | (Ethics Commission Filers) |
| Sun City Democrats Cl   | lub   |              |               |              | 00058072    |                            |
| 14 COMMITTEE<br>ACTIVITY  | Candidates (Identify by name or, if applicable, classify by party.)                     |              | Anna Smith Sc | hool Board   |             |                            |
| (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   |               |              |             |                            |
|   | Officeholders     Assisted  (Identify by name or, if applicable, classify by party.)    |              |               |              |             |                            |
| COMMITTEE<br>ACTIVITY   | Candidates     (Identify by name or, if applicable, classify by party.)                 |              | Sade Fashokun | School Board |             |                            |
| (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   |               |              |             |                            |
|   | Officeholders     Assisted  (Identify by name or, if applicable, classify by party.)    |              |               |              |             |                            |
| COMMITTEE<br>ACTIVITY   | Candidates (Identify by name or, if applicable, classify by party.)                     |              | Nekosi Nelson | School Board |             |                            |
| (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   |               |              |             |                            |
|   | Officeholders     Assisted     (Identify by name or, if applicable, classify by party.) |              |               |              |             |                            |

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

## FORM GPAC ADDENDUM

|   |   |              |              |              |             | Page 4 of 17               |
|---|---|--------------|--------------|--------------|-------------|----------------------------|
| 12 COMMITTEE NAME   |   |              |              |              | 13 Filer ID | (Ethics Commission Filers) |
| Sun City Democrats Clu  | ıb  |              |              |              | 00058072    |                            |
| 14 COMMITTEE<br>ACTIVITY  | 1. Candidates (Identify by name or, if applicable, classify by party.)                |              | Chuy Zarate  | School Board |             |                            |
| (Attach lists on plain paper to complete this report if necessary.) |   | B. Opposed   |              |              |             |                            |
|   | 2. Measures<br>(Describe by date and<br>location of election and<br>nature of issue.) | A. Supported |              |              |             |                            |
|   |   | B. Opposed   |              |              |             |                            |
|   | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)    |              |              |              |             |                            |
| COMMITTEE<br>ACTIVITY   | 1. Candidates (Identify by name or, if applicable, classify by party.)                |              | Micheal Wei  | School Board |             |                            |
| (Attach lists on plain paper to complete this report if necessary.) |   | B. Opposed   |              |              |             |                            |
|   | 2. Measures<br>(Describe by date and<br>location of election and<br>nature of issue.) | A. Supported |              |              |             |                            |
|   |   | B. Opposed   |              |              |             |                            |
|   | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)    |              |              |              |             |                            |
| COMMITTEE<br>ACTIVITY   | Candidates     (Identify by name or, if applicable, classify by party.)               |              | Melissa Ross | School Board |             |                            |
| (Attach lists on plain paper to complete this report if necessary.) |   | B. Opposed   |              |              |             |                            |
|   | 2. Measures<br>(Describe by date and<br>location of election and<br>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

|     |   |  |                             | 5 of 17                    |
|-----|---|--|-----------------------------|----------------------------|
|     |   | EE NAME<br>Democrats Club  | <b>18</b> Filer ID 00058072 | (Ethics Commission Filers) |
|     |   | E SUBTOTALS<br>SCHEDULE  |                             | SUBTOTAL AMOUNT            |
| 1.  | Х | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                  |                             | \$ 1,173.00                |
| 2.  |   | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                    |                             | \$                         |
| 3.  |   | SCHEDULE B: PLEDGED CONTRIBUTIONS  |                             | \$                         |
| 4.  |   | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION      | ·R                          | \$                         |
| 5.  |   | ATION OR   | \$                          |                            |
| 6.  |   | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA                   | ANIZATION                   | \$                         |
| 7.  |   | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION       |                             | \$                         |
| 8.  |   | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C                  | ORGANIZATION                | \$                         |
| 9.  |   | SCHEDULE E: LOANS  |                             | \$                         |
| 10. | Х | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS               | 5                           | \$ 4,000.00                |
| 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. | Х | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION             | ONS                         | <b>\$</b> 1,174.75         |
| 15. |   | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F<br>TO FILER | RETURNED                    | \$                         |
|     |   |  |                             |                            |
|     |   |  |                             |                            |
|     |   |  |                             |                            |
|     |   |  |                             |                            |
|     |   |  |                             |                            |
|     |   |  |                             |                            |
|     |   |  |                             |                            |

|   | MONET                     | ARY POLITICAL CONTRIBUTION  | N   | IS                                       |                | SCHEDUL  | E <b>A1</b> |
|---|---------------------------|---|-----|--|----------------|--|-------------|
|   | The Instruc               | ction Guide explains how to complete this f   | orı | m.                                       | 1              | Total pages Schedule A1:<br>Sch: 1/8 Rpt: 6/17 |             |
| 2 | FILER NAME Sun City Der   | mocrats Club  |     |  | 3              | Filer ID (Ethics Commission 00058072           | n Filers)   |
| 4 | Date 10/13/2024           | <ul> <li>Full name of contributor</li></ul>   |     | )  | 7              | Amount of Contribution (\$)                    | \$20.00     |
| _ | Dringing Loon             | Georgetown, TX 78633  | _   | Employer (See Instructions               | <u></u>        |  |             |
| 8 | employed                  | pation / Job title (See Instructions)   | 9   | Employer (See Instructions Self Employed | ·)             |  |             |
|   | Date<br>10/13/2024        | Full name of contributor out-of-state PAC (ID#:_<br>Aguirre, Patricia<br>Contributor address; City; State; Zip Code               |     |  |                | Amount of Contribution (\$)                    | \$20.00     |
|   | Principal occu            | Georgetown, TX 78633 pation / Job title (See Instructions)  |     | Employer (See Instructions               | <u>:)</u>      |  |             |
|   |                           | proker/barista  |     | Self Employed                            | "              |  |             |
|   | Date<br>09/27/2024        | Full name of contributor out-of-state PAC (ID#:_BLANCHARD, KATHRYN  Contributor address; City; State; Zip Code                    |     | )  |                | Amount of Contribution (\$)                    | \$10.00     |
|   |                           | Georgetown, TX 78633  |     |  |                |  |             |
|   | Principal occu<br>Retired | pation / Job title (See Instructions)   |     | Employer (See Instructions NONE          | s)             |  |             |
|   | Date<br>10/19/2024        | Full name of contributor out-of-state PAC (ID#:_Blazek, Susanne  Contributor address; City; State; Zip Code  Georgetown, TX 78633 |     |  |                | Amount of Contribution (\$)                    | \$20.00     |
|   | Principal occu<br>retired | pation / Job title (See Instructions)   |     | Employer (See Instructions retired       | <u>I</u><br>S) |  |             |
|   | Date<br>09/27/2024        | Full name of contributor out-of-state PAC (ID#:_ Bowles, Nancy Contributor address; City; State; Zip Code  Georgetown, TX 78633   |     |  |                | Amount of Contribution (\$)                    | \$100.00    |
|   | Principal occu<br>Retired | pation / Job title (See Instructions)   |     | Employer (See Instructions NONE          | 5)             |  |             |
|   |                           |   |     |  |                |  |             |

|   | MONET   | ARY POLITICAL CONTRIBUT  | ΓΙΟΝ   | IS                                 |                | SCHEDULI                                       | E <b>A1</b> |
|---|---|--|--------|------------------------------------|----------------|--|-------------|
|   | The Instruc   | ction Guide explains how to complete th  | is for | m.                                 | 1              | Total pages Schedule A1:<br>Sch: 2/8 Rpt: 7/17 |             |
| 2 | FILER NAME Sun City Der   | nocrats Club   |        |                                    | 3              | Filer ID (Ethics Commission 00058072           | n Filers)   |
| 4 | Date<br>10/19/2024  | <ul> <li>Full name of contributor  out-of-state PAC (I Carlton, Betty</li> <li>Contributor address; City; State; Zip Code</li> </ul> |        |                                    | 7              | Amount of Contribution (\$)                    | \$20.00     |
| _ |   | Georgetown, TX 78633   | - 1-   |                                    |                |  |             |
| 8 | Principal occu<br>retired   | pation / Job title (See Instructions)  | 9      | Employer (See Instructions retired | 5)             |  |             |
|   | Date<br>09/27/2024  | Full name of contributor out-of-state PAC (I<br>Ciarrocchi, Ernest<br>Contributor address; City; State; Zip Code                     |        | )                                  |                | Amount of Contribution (\$)                    | \$20.00     |
|   | Principal occur   | Georgetown, TX 78633 pation / Job title (See Instructions)   |        | Employer (See Instructions         | <u>;)</u>      |  |             |
|   | Retired   | salon, out the (ede included),   |        | NONE                               | -,             |  |             |
|   | Date<br>10/01/2024  | Full name of contributor out-of-state PAC (i<br>Ciarrocchi, Ernest<br>Contributor address; City; State; Zip Code                     | ID#:   | )                                  |                | Amount of Contribution (\$)                    | \$20.00     |
|   |   | Georgetown, TX 78633   |        |                                    |                |  |             |
|   | Principal occu<br>Retired   | pation / Job title (See Instructions)  |        | Employer (See Instructions NONE    | 5)             |  |             |
|   | Date  O9/27/2024  Full name of contributor  Davis, Kathleen  Contributor address; City; State; Zip Code  Georgetown, TX 78633 |  |        | )                                  |                | Amount of Contribution (\$)                    | \$10.00     |
|   | Principal occu<br>Retired   | pation / Job title (See Instructions)  |        | Employer (See Instructions         | <u>l</u><br>s) |  |             |
|   | Date<br>10/07/2024  | Full name of contributor out-of-state PAC ( Davis, Kathleen  Contributor address; City; State; Zip Code  Georgetown, TX 78633        |        |                                    |                | Amount of Contribution (\$)                    | \$10.00     |
|   | Principal occu<br>Retired   | pation / Job title (See Instructions)  |        | Employer (See Instructions NONE    | 5)             |  |             |
|   |   |  | •      |                                    |                |  |             |

|   | MONET                     | ARY POLITICAL CONTRIBUT   | TION    | IS  |                | SCHEDULI                                       | E <b>A1</b> |
|---|---------------------------|---|---------|---|----------------|--|-------------|
|   | The Instruc               | ction Guide explains how to complete th   | nis for | m.  | 1              | Total pages Schedule A1:<br>Sch: 3/8 Rpt: 8/17 |             |
| 2 | FILER NAME Sun City Der   | nocrats Club  |         |   | 3              | Filer ID (Ethics Commission 00058072           | r Filers)   |
| 4 | Date 09/27/2024           | <ul> <li>Full name of contributor  out-of-state PAC (Elias, Edward</li> <li>Contributor address; City; State; Zip Code</li> </ul> |         | )   | 7              | Amount of Contribution (\$)                    | \$20.00     |
| _ | Daine in a la casa        | Georgetown, TX 78633  | la.     | Faralassa (Osas kastaustisas                      |                |  |             |
| 8 | Retired                   | pation / Job title (See Instructions)   | 9       | Employer (See Instructions NONE                   | 5)             |  |             |
|   | Date<br>09/27/2024        | Full name of contributor out-of-state PAC ( Freiter, Karen  Contributor address; City; State; Zip Code                            |         | )   |                | Amount of Contribution (\$)                    | \$75.00     |
|   | Deinsinal assu            | Georgetown, TX 78633  |         |   |                |  |             |
|   | Retired                   | pation / Job title (See Instructions)   |         | Employer (See Instructions City of Louisville, CO | 5)             |  |             |
|   | Date<br>10/08/2024        | Full name of contributor out-of-state PAC ( Gilby, Kim  Contributor address; City; State; Zip Code                                |         | )   |                | Amount of Contribution (\$)                    | \$10.00     |
|   |                           | Cedar Park, TX 78613  |         |   |                |  |             |
|   | Principal occu<br>Retired | pation / Job title (See Instructions)   |         | Employer (See Instructions NONE                   | s)             |  |             |
|   | Date<br>09/30/2024        | Contributor address; City; State; Zip Code  |         |   |                | Amount of Contribution (\$)                    | \$28.00     |
|   | Principal occu<br>Retired | Georgetown, TX 78633 pation / Job title (See Instructions)  |         | Employer (See Instructions                        | <u> </u><br>5) |  |             |
|   | Date<br>09/27/2024        | Full name of contributor out-of-state PAC (Herwig, Judy  Contributor address; City; State; Zip Code  Georgetown, TX 78633         |         |   |                | Amount of Contribution (\$)                    | \$20.00     |
|   | Principal occu<br>Retired | pation / Job title (See Instructions)   |         | Employer (See Instructions NONE                   | s)             |  |             |
|   |                           |   |         |   |                |  |             |

|   | MONET                     | ARY POLITICAL CO  | ONTRIBUTION                           | IS                                 |                | SCHEDULE                                       | <b>■ A1</b> |
|---|---------------------------|---|---------------------------------------|------------------------------------|----------------|--|-------------|
|   | The Instruc               | ction Guide explains how t  | o complete this for                   | m.                                 | 1              | Total pages Schedule A1:<br>Sch: 4/8 Rpt: 9/17 |             |
| 2 | FILER NAME Sun City Der   | mocrats Club  |                                       |                                    | 3              | Filer ID (Ethics Commission 00058072           | ı Filers)   |
| 4 | Date 10/10/2024           | <ul><li>5 Full name of contributor</li></ul>  | out-of-state PAC (ID#:e; Zip Code     | )                                  | 7              | Amount of Contribution (\$)                    | \$20.00     |
| _ |                           | Georgetown, TX 78633  |                                       |                                    |                |  |             |
| 8 | Principal occu<br>Retired | pation / Job title (See Instructions)   | 9                                     | Employer (See Instructions NONE    | 5)             |  |             |
|   | Date<br>10/23/2024        | Full name of contributor  Jackson, Becky  Contributor address; City; Stat                       |                                       | )                                  | •              | Amount of Contribution (\$)                    | \$20.00     |
|   | Delicalization            | Georgetown, TX 78633  |                                       | Frankrije (Ozakativati             |                |  |             |
|   | retired                   | pation / Job title (See Instructions)   |                                       | Employer (See Instructions retired | S)             |  |             |
|   | Date<br>10/23/2024        | Full name of contributor  Jackson, Brian  Contributor address; City; Stat                       | out-of-state PAC (ID#:e; Zip Code     | )                                  |                | Amount of Contribution (\$)                    | \$20.00     |
|   |                           | Georgetown, TX 78633  |                                       |                                    |                |  |             |
|   | Principal occu<br>retired | pation / Job title (See Instructions)   |                                       | Employer (See Instructions retired | s)             |  |             |
|   | Date<br>10/19/2024        | Full name of contributor  Johnson, Allen  Contributor address; City; Stat  Georgetown, TX 78633 | out-of-state PAC (ID#:<br>e; Zip Code | )                                  |                | Amount of Contribution (\$)                    | \$20.00     |
|   | Principal occu<br>retired | pation / Job title (See Instructions)   |                                       | Employer (See Instructions retired | <u>l</u><br>s) |  |             |
|   | Date<br>10/01/2024        | Full name of contributor  Kelley, Connie  Contributor address; City; Stat  Georgetown, TX 78787 | out-of-state PAC (ID#:                |                                    |                | Amount of Contribution (\$)                    | \$20.00     |
|   | Principal occu<br>retired | pation / Job title (See Instructions)   |                                       | Employer (See Instructions retired | 5)             |  |             |
|   |                           |   | 1                                     |                                    |                |  |             |

|                    | MONET                         | ARY POLITICAL CONTR  | IBUTION        | S                                  |                | SCHEDULE  | <b>■ A1</b> |
|--------------------|-------------------------------|--|----------------|------------------------------------|----------------|---|-------------|
|                    | The Instru                    | ction Guide explains how to comp   | lete this forr | n.                                 | 1              | Total pages Schedule A1:<br>Sch: 5/8 Rpt: 10/17 |             |
| 2                  | FILER NAME Sun City Der       | mocrats Club   |                |                                    | 3              | Filer ID (Ethics Commission 00058072            | ı Filers)   |
| 4                  | Date 09/27/2024               | <ul> <li>Full name of contributor  out-of-star</li></ul>   |                |                                    | 7              | Amount of Contribution (\$)                     | \$10.00     |
| _                  |                               | Georgetown, TX 78633   | - la           | 5 1 (0 1 1 1                       | <u></u>        |   |             |
| 8                  | Principal occu<br>Retired     | pation / Job title (See Instructions)  | 9              | Employer (See Instructions NONE    | 5)             |   |             |
|                    | Date<br>10/09/2024            | Kennedy, Peggy   |                |                                    |                | Amount of Contribution (\$)                     | \$10.00     |
|                    | Principal occu                | Georgetown, TX 78633 pation / Job title (See Instructions)   | 1              | Employer (See Instructions         | ;)<br>         |   |             |
|                    | Retired                       | pation 7 cos title (ecc mondottorio)   |                | NONE                               | -)             |   |             |
|                    | Date<br>09/27/2024            | Full name of contributor out-of-sta<br>Kettler, Alisa<br>Contributor address; City; State; Zip Cod | ate PAC (ID#:  | )                                  | •              | Amount of Contribution (\$)                     | \$10.00     |
|                    |                               | Austin, TX 78717   |                |                                    |                |   |             |
|                    | Principal occu<br>tax examine | pation / Job title (See Instructions)  |                | Employer (See Instructions IRS     | 5)             |   |             |
| Date<br>09/29/2024 |                               | McCurley, Carla  Contributor address; City; State; Zip Cod   |                | )                                  |                | Amount of Contribution (\$)                     | \$20.00     |
|                    | Principal occu                | Pflugerville, TX 78660 pation / Job title (See Instructions)                                       |                | Employer (See Instructions retired | <u> </u><br>s) |   |             |
|                    | Date<br>09/27/2024            | Pelc, Robert   | ate PAC (ID#:  | )                                  | •              | Amount of Contribution (\$)                     | \$20.00     |
|                    | Principal occu<br>Retired     | pation / Job title (See Instructions)  |                | Employer (See Instructions NONE    | 5)             |   |             |
|                    |                               |  | <b>,</b>       |                                    |                |   |             |

|   | MONET                     | ARY POLITICAL C  | ONTRIBUTION            | IS                                 |    | SCHEDUL   | E <b>A1</b> |
|---|---------------------------|--|------------------------|------------------------------------|----|---|-------------|
|   | The Instruc               | ction Guide explains how t   | to complete this for   | m.                                 | 1  | Total pages Schedule A1:<br>Sch: 6/8 Rpt: 11/17 |             |
| 2 | FILER NAME Sun City Der   | mocrats Club   |                        |                                    | 3  | Filer ID (Ethics Commission 00058072            | n Filers)   |
| 4 | Date<br>10/06/2024        | <ul><li>5 Full name of contributor Pelc, Robert</li><li>6 Contributor address; City; State</li></ul> | out-of-state PAC (ID#: |                                    | 7  | Amount of Contribution (\$)                     | \$20.00     |
| 8 | Dringinal occu            | Georgetown, TX 78633 pation / Job title (See Instructions)   | la la                  | Employer (See Instructions         |    |   |             |
| 0 | Retired                   | pation / 300 title (See instructions)  | 9                      | NONE                               | ') |   |             |
|   | Date<br>09/27/2024        | Full name of contributor Pfeil, Rick Contributor address; City; Stat                                 |                        |                                    |    | Amount of Contribution (\$)                     | \$300.00    |
|   | Dringing! agg.            | Taylor, TX 76574   |                        | Employer (Coo Instructions         | _  |   |             |
|   | Retired                   | pation / Job title (See Instructions)  |                        | Employer (See Instructions NONE    | )  |   |             |
|   | Date<br>10/03/2024        | Full name of contributor  Reynolds, Bill  Contributor address; City; Stat                            | out-of-state PAC (ID#: |                                    |    | Amount of Contribution (\$)                     | \$20.00     |
|   |                           | Georgetown, TX 78633   |                        |                                    |    |   |             |
|   | Principal occu<br>retired | pation / Job title (See Instructions)  |                        | Employer (See Instructions retired | 5) |   |             |
|   | Date<br>10/03/2024        | Full name of contributor Reynolds, Yolonda Contributor address; City; Stat Georgetown, TX 78633      | out-of-state PAC (ID#: |                                    |    | Amount of Contribution (\$)                     | \$20.00     |
|   | Principal occu<br>retired | pation / Job title (See Instructions)  |                        | Employer (See Instructions retired | () |   |             |
|   | Date<br>09/27/2024        | Full name of contributor Scovill, Becky Contributor address; City; Stat                              | out-of-state PAC (ID#: |                                    |    | Amount of Contribution (\$)                     | \$20.00     |
|   | Principal occu<br>Retired | pation / Job title (See Instructions)  |                        | Employer (See Instructions NONE    | )  |   |             |
|   |                           |  | •                      |                                    |    |   |             |

|                           | MONET                     | ARY POLITICAL CONTRI   | BUTION      | IS                                 |   | SCHEDUL   | E <b>A1</b> |
|---------------------------|---------------------------|--|-------------|------------------------------------|---|---|-------------|
|                           | The Instru                | ction Guide explains how to comple   | te this for | m.                                 | 1   | Total pages Schedule A1:<br>Sch: 7/8 Rpt: 12/17 |             |
| 2                         | FILER NAME Sun City Der   | nocrats Club   |             |                                    | 3   | Filer ID (Ethics Commission 00058072            | n Filers)   |
| 4                         | Date<br>10/08/2024        | <ul> <li>Full name of contributor  out-of-state  Scovill, Becky</li> <li>Contributor address; City; State; Zip Code</li> </ul> | PAC (ID#:   |                                    | 7   | Amount of Contribution (\$)                     | \$20.00     |
|                           |                           | Georgetown, TX 78633   |             |                                    |   |   |             |
| 8                         | Principal occu<br>Retired | pation / Job title (See Instructions)  | 9           | Employer (See Instructions NONE    | 5)  |   |             |
|                           | Date<br>10/19/2024        | Siclari, Patty   | PAC (ID#:   | )                                  |   | Amount of Contribution (\$)                     | \$20.00     |
|                           | Dringing aggr             | Georgetown, TX 78633   |             | Employer (See Instructions         | <u></u>                                       |   |             |
|                           | retired                   | pation / Job title (See Instructions)  |             | Employer (See Instructions retired | s)  |   |             |
|                           | Date<br>10/13/2024        | Full name of contributor out-of-state Stuart, Jodi Contributor address; City; State; Zip Code                                  | PAC (ID#:   |                                    |   | Amount of Contribution (\$)                     | \$20.00     |
|                           |                           | Georgetown, TX 78633   |             |                                    |   |   |             |
|                           | Principal occu<br>retired | pation / Job title (See Instructions)  |             | Employer (See Instructions retired | 5)  |   |             |
| 10/13/2024 Stuart, Robert |                           | Stuart, Robert   | PAC (ID#:   | )                                  | •   | Amount of Contribution (\$)                     | \$20.00     |
|                           | Principal occu<br>retired | pation / Job title (See Instructions)  |             | Employer (See Instructions retired | <u>                                      </u> |   |             |
|                           | Date<br>09/27/2024        | Full name of contributor out-of-state Thomas, Paul Contributor address; City; State; Zip Code Georgetown, TX 78633             | PAC (ID#:   |                                    |   | Amount of Contribution (\$)                     | \$100.00    |
|                           | Principal occu<br>Retired | pation / Job title (See Instructions)  |             | Employer (See Instructions NONE    | s)  |   |             |
|                           |                           |  | '           |                                    |   |   |             |

|   | MONET                  | TARY POLITICAL CONTRIBUTION   | DNS                               |          | SCHEDUL   | E <b>A1</b> |
|---|------------------------|---|-----------------------------------|----------|---|-------------|
|   | The Instru             | ction Guide explains how to complete this f   | orm.                              | 1        | Total pages Schedule A1:<br>Sch: 8/8 Rpt: 13/17 |             |
| 2 | FILER NAME Sun City De | mocrats Club  |                                   | 3        | Filer ID (Ethics Commission 00058072            | n Filers)   |
| 4 | Date 09/27/2024        | Full name of contributor  |                                   | 7        | Amount of Contribution (\$)                     | \$10.00     |
|   |                        | Georgetown, TX 78633  | la = 1 (0 1 1 1 1                 | Ĺ        |   |             |
| 8 | Retired                | upation / Job title (See Instructions)  | 9 Employer (See Instruction: NONE | s)       |   |             |
|   | Date<br>10/05/2024     | Full name of contributor out-of-state PAC (ID#:_ Wells, Gloria Contributor address; City; State; Zip Code | )                                 |          | Amount of Contribution (\$)                     | \$10.00     |
|   | Dein sin al a ser      | Georgetown, TX 78633  |                                   | <u> </u> |   |             |
|   | Retired                | upation / Job title (See Instructions)  | Employer (See Instruction: NONE   | s)       |   |             |
|   | Date<br>09/29/2024     | Contributor address; City; State; Zip Code  | )                                 |          | Amount of Contribution (\$)                     | \$20.00     |
|   | Principal occu         | Georgetown, TX 78633  upation / Job title (See Instructions)  | Employer (See Instruction:        | <br>s)   |   |             |
|   | Retired (retir         | red)  | NONE                              |          |   |             |
|   |                        |   |                                   |          |   |             |

## 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 Comm

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<br>Candidate/Officeholder/Politica<br>Credit Card Payment |   |  |
|--|---|--|
| 4 Tatal manua Cabadala E4.   |   |  |
| 1 Total pages Schedule F1:<br>Sch: 1/3 Rpt: 14/17  | 2 FILER NAME Sun City Democrats Club 3 Filer ID (Ethics Commission Filers) 00058072   |  |
| 4 Date   | 5 Payee name  |  |
| 09/30/2024   | Ellis, Maggie   |  |
| 6 Amount (\$)  | 7 Payee address; City; State; Zip Code  |  |
| \$1,000.00   | 8127 Mesa Dr  |  |
|  | Suite 8206-225  |  |
| Expenditure from corporate funds   | Austin, TX 78759  |  |
|  |   |  |
| 8 PURPOSE<br>OF  | (a) Category (See Categories listed at the top of this schedule)  (b) Description   |  |
| EXPENDITURE  | Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |  |
|  | Candidate/Officeholder/Political Committee  |  |
|  | Campaigh Contribution   |  |
|  |   |  |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol                               | Candidate/Officeholder name Office sought Office held   |  |
| Date   | Payee name  |  |
| 10/12/2024   | Fashokun, Sade  |  |
| Amount (\$)  | Payee address; City; State; Zip Code  |  |
| \$500.00   | 1841 S. Lakeline Blvd #101-114  |  |
| \$500.00   | 1841 S. Lakeline Bivu #101-114  |  |
| Expenditure from   |   |  |
| corporate funds  | Cedar Park, TX 78613  |  |
| 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   | 4   |  |
| Data   | Davies same   |  |
| Date   | Payee name  |  |
| 10/12/2024   | Nelson, Nekosi  |  |
| Amount (\$)  | Payee address; City; State; Zip Code  |  |
| \$500.00   | 1420 Siena Sunset Rd  |  |
|  |   |  |
| Expenditure from corporate funds   | Leander, TX 78641   |  |
| -  | I   |  |
| PURPOSE<br>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  |  |
|  | Sampaigh Contribution   |  |
| Operation Children   | On didn't 10 ff a halden game   |  |
| Complete <u>ONLY</u> if direct<br>expenditure to benefit C/OI                              | Candidate/Officeholder name Office sought Office held   |  |
| - p  |   |  |
|  |   |  |
|  |   |  |
|  |   |  |

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

| Contributions/ Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment |  |
|--|--|
| 1 Total pages Schedule F1:   |  |
|  |  |
| Sch: 2/3 Rpt: 15/17  | Sun City Democrats Club 00058072   |
| 4 Date   | 5 Payee name   |
| 10/12/2024   | Ross, Melissa  |
| 6 Amount (\$)  | 7 Payee address; City; State; Zip Code   |
| \$500.00   | 6704 Township Trail  |
| Ψ500.00  | 0704 TOWNSHIP TTAIL  |
| Expenditure from   |  |
| corporate funds  | Austin, TX 78759   |
| 8 PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
| OF<br>EXPENDITURE  | Contributions/Donations Made By   Check if travel outside of Texas. Complete Schedule T.   |
| EXPENDITORE  | 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   | Payoo namo   |
|  | Payee name   |
| 10/12/2024   | Smith, Anna  |
| Amount (\$)  | Payee address; City; State; Zip Code   |
| \$500.00   | 16760 Ronald W Reagan Blvd Unit 511  |
|  |  |
| Expenditure from corporate funds   | Leander, TX 78641  |
| PURPOSE  | 1  |
| OF   | (a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Contributions/Donations Made By   |
| 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 |
|  | Campaign Contribution  |
|  | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  |
| Complete <u>ONLY</u> if direct   | Candidate/Officeholder name Office sought Office held  |
| expenditure to benefit C/O   | <b>v</b>   |
| ,  |  |
| Date   | Payee name   |
| 10/12/2024   | Wei, Micheal   |
| Amount (\$)  | Payee address; City; State; Zip Code   |
| \$500.00   | 11770 Jollyville Rd  |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  |  |
| Expenditure from   | Douad Dools TV 70750   |
| corporate funds  | Round Rock, TX 78759   |
| PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description   |
| OF<br>EXPENDITURE  | Contributions/Donations Made By  |
|  | Candidate/Officeholder/Political Committee   |
|  | Campaign Contribution  |
|  |  |
| Complete ONLY if direct  | Candidate/Officeholder name Office sought Office held  |
| expenditure to benefit C/O   |  |
|  |  |
|  |  |
|  |  |

## 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

| Contributions/ Donations Made B<br>Candidate/Officeholder/Politic<br>Credit Card Payment | 7 - Gift/Awards/Memorials Expense Printing Expense Travel Out of District Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.   |
|--|---|
| 1 Total pages Schedule F1:<br>Sch: 3/3 Rpt: 16/17  | Sun City Democrats Club 00058072  |
| 4 Date<br>10/12/2024<br>6 Amount (\$)  | <ul> <li>5 Payee name         Zarate, Estevan</li> <li>7 Payee address; City; State; Zip Code</li> </ul>  |
| \$500.00   | 3811 Cypress Point Cv   |
| corporate funds  | Round Rock, TX 78664  |
| 8 PURPOSE<br>OF<br>EXPENDITURE   | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign Contribution |
| Complete ONLY if direct<br>expenditure to benefit C/O                                    | Candidate/Officeholder name Office sought Office held   |
|  |   |

## NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE |

|   |   | The Instruction Guide explains how to complete this form.  |
|---|---|--|
| 1 | Total pages Schedule I:<br>Sch: 1/1 Rpt:              | 2 FILER NAME Sun City Democrats Club  3 Filer ID (Ethics Commission Filers) 00058072   |
| 4 | Date<br>10/01/2024                                    | 5 Payee name<br>Hutchinson, Darrell  |
| 6 | Amount (\$)  170.00  Expenditure from corporate funds | 7 Payee Address; City; State; Zip 1028 Highknoll Lane Georgetown, TX 78628   |
| 8 | PURPOSE<br>OF<br>EXPENDITURE                          | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense  (b) Description Name Tags  |
|   | Date<br>10/15/2024                                    | Payee name<br>Mail Chimp   |
|   | Amount (\$)  28.25  Expenditure from corporate funds  | Payee Address; City; State; Zip 405 N Angier Ave. NE.  Atlanta, GA 30308   |
|   | PURPOSE<br>OF<br>EXPENDITURE                          | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required.) Mail Service |
|   | Date<br>10/03/2024                                    | Payee name Sun City Texas Community Association  |
|   | Amount (\$)  976.50  Expenditure from corporate funds | Payee Address; City; State; Zip 2 Texas Drive Bldg A Georgetown, TX 78633  |
|   | PURPOSE<br>OF<br>EXPENDITURE                          | (a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense (b) Description (See instructions regarding type of information required.) Room Rents   |
|   |   |  |