#### 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) 00081075 3 COMMITTEE NAME **OFFICE USE ONLY** Friends of the Expo Center PAC Date Received **ELECTRONICALLY FILED** 10/02/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 1118 Date Hand-delivered or Date Postmarked Change of Address Dripping Springs, TX 78620 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Jay NAME NICKNAME LAST **SUFFIX** Evans STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 139 Lone Wolf Court STREET **ADDRESS** (Residence or Business) Dripping Springs, TX 78620 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** P.O. Box 1118 MAILING **ADDRESS** Dripping Springs, TX 78620 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 694-1964 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) X **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2024 09/26/2024 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)
Friends of the Expo C	Center PAC	00081075		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Commissioner Jeff Travillion T	ravis County C	Commissioner
(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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS No check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)  qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	5,500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	2,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	4,087.00
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 pe true and correct and includes all informunder Title 15, Election Code.		
		Mr. Ja	y Evans	
		Signature of Car	mpaign Treasure	er
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said _	, th	nis 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 office	er administering oath
Signature of officer	administering out	es rane of oneer administering oath	THE OF OTHER	administering batti

### GENERAL-PURPOSE COMMITTEE REPORT:

### FORM GPAC

Friends of the Expo Center PAC  COMMITTEE ACTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  Attach lists on plain paper to complete this  B. Opposed	PURPOSE							//DDL/IDOM
Triends of the Expo Center PAC  COMMITTEE (Identify by name or, if applicable, classify by party.)  Attach lists on plain laper to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted  A. Supported Commissioner Brigid Shea Travis County Commissioner Manuer Science Brigid Shea Travis C								
Attach lists on plain laper to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted	COMMITTEE NAME					[:		(Ethics Commission Filers)
Attach lists on plain lappicable, classify by party.  Attach lists on plain lapper to complete this lappicable port if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  A. Supported  B. Opposed  B. Opposed	Friends of the Expo Center	er PAC					00081075	
2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders Assisted			A. Supported	Commissio	ner Brigid Sh	nea Travis	County Com	missioner
(Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders Assisted	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
B. Opposed  3. Officeholders Assisted			A. Supported					
Assisted	n	ature of issue.)	B. Opposed					
Assisted								
(Identify by name or, if applicable, classify by party.)		Assisted						
	(I a	Identify by name or, if applicable, classify by party.)						

### **SUBTOTALS - GPAC**

## FORM GPAC COVER SHEET PG 3

				OVER OTIEET I	4 of 6
l		EE NAME the Expo Center PAC	<b>18</b> Filer ID 00081075	(Ethics Commission Fi	lers)
		E SUBTOTALS	0000_0.0		
NA	ME OF	SCHEDULE		SUBTOTAL AMO	UNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 5	5,500.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 2	2,000.00
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.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

MONET	FARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A1
The Instru	uction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/6	
2 FILER NAME Friends of tl	e he Expo Center PAC		3 Filer ID (Ethics Commission Filers) 00081075
4 Date 08/29/2024	<ul> <li>5 Full name of contributor  out-of-state PAC (ID#:_Evans, Jay</li> <li>6 Contributor address; City; State; Zip Code</li> </ul>	7 Amount of Contribution (\$) \$500.00	
9 Principal occ	Dripping Springs, TX 78620 upation / Job title (See Instructions)	9 Employer (See Instructions	5)
Rancher	upation / 300 title (See instructions)	Employer (See instructions	5)
Date 08/29/2024	Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$5,000.00
Principal occi Real Estate	Austin, TX 78750 upation / Job title (See Instructions) e Developer	Employer (See Instructions	<u> </u> s)

## 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
OTHER (outer a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 6/6	Friends of the Expo Center PAC 00081075
4 Date 09/09/2024	5 Payee name Brigid Shea Campaign
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code P.O. Box 5674
Expenditure from corporate funds	Austin, TX 78703
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/28/2024	Jeff Travillion Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 5674
Expenditure from corporate funds	Austin, TX 78763
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held