

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>	<b>1</b> Filer ID (Ethics Commission Filers) 00084977	<b>2</b> Total pages filed: 8															
<b>3</b> COMMITTEE NAME Black Women of Greater Houston PAC		<div style="text-align: center;"><b>OFFICE USE ONLY</b></div> Date Received ELECTRONICALLY FILED 10/03/2024  Date Hand-delivered or Date Postmarked  <table style="width:100%; border: none;"> <tr> <td style="border: none; width: 60%;">Receipt #</td> <td style="border: none;">Amount</td> </tr> <tr> <td colspan="2" style="border: none;">Date Processed</td> </tr> <tr> <td colspan="2" style="border: none;">Date Imaged</td> </tr> </table>	Receipt #	Amount	Date Processed		Date Imaged										
Receipt #	Amount																
Date Processed																	
Date Imaged																	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3139 W. Holcombe Blvd. Ste. 420 HOUSTON, TX 77025																
<b>5</b> CAMPAIGN TREASURER NAME	<table style="width:100%; border: none;"> <tr> <td style="width: 30%;">MS / MRS / MR</td> <td style="width: 30%;">FIRST</td> <td style="width: 40%;">MI</td> </tr> <tr> <td></td> <td>Duni</td> <td></td> </tr> <tr><td colspan="3" style="border-top: 1px dotted black;"></td></tr> <tr> <td>NICKNAME</td> <td>LAST</td> <td>SUFFIX</td> </tr> <tr> <td></td> <td>Hebron</td> <td></td> </tr> </table>		MS / MRS / MR	FIRST	MI		Duni					NICKNAME	LAST	SUFFIX		Hebron	
MS / MRS / MR	FIRST	MI															
	Duni																
NICKNAME	LAST	SUFFIX															
	Hebron																
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 11823 Sea Shadow Bend  Pearland, TX 77584																
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 11823 Sea Shadow Bend  Pearland, TX 77584																
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (281) 989-8876																
<b>9</b> REPORT TYPE	<table style="width:100%; border: none;"> <tr> <td><input type="checkbox"/> January 15</td> <td><input checked="" type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Dissolution (Attach PAC-DR)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> 10th day after campaign treasurer termination</td> </tr> <tr> <td></td> <td><input type="checkbox"/> Runoff</td> <td></td> </tr> </table>		<input type="checkbox"/> January 15	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution (Attach PAC-DR)	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> 10th day after campaign treasurer termination		<input type="checkbox"/> Runoff							
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<b>10</b> PERIOD COVERED	<table style="width:100%; border: none;"> <tr> <td style="width: 30%;">Month Day Year</td> <td style="width: 40%; text-align: center;">THROUGH</td> <td style="width: 30%;">Month Day Year</td> </tr> <tr> <td>07/01/2024</td> <td></td> <td>09/26/2024</td> </tr> </table>		Month Day Year	THROUGH	Month Day Year	07/01/2024		09/26/2024									
Month Day Year	THROUGH	Month Day Year															
07/01/2024		09/26/2024															
<b>11</b> ELECTION	<table style="width:100%; border: none;"> <tr> <td style="width: 40%;">ELECTION DATE Month Day Year</td> <td colspan="2">ELECTION TYPE</td> </tr> <tr> <td>11/05/2024</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> </tr> <tr> <td></td> <td><input checked="" type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Other</td> </tr> </table>		ELECTION DATE Month Day Year	ELECTION TYPE		11/05/2024	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special			<input type="checkbox"/> Other			
ELECTION DATE Month Day Year	ELECTION TYPE																
11/05/2024	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff															
	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special															
		<input type="checkbox"/> Other															

**GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Black Women of Greater Houston PAC	<b>13 Filer ID</b> (Ethics Commission Filers) 00084977
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<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
		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> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 300.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 1,500.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 18,429.16
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 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.

Duni Hebron  
\_\_\_\_\_  
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

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
3 of 8

<b>17 COMMITTEE NAME</b> Black Women of Greater Houston PAC		<b>18 Filer ID</b> (Ethics Commission Filers) 00084977
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 300.00
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,500.00
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	\$ 2,143.99
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: 1/1 Rpt: 4/8
<b>2</b> FILER NAME Black Women of Greater Houston PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00084977
<b>4</b> Date 07/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Armstrong, Nomathemba	<b>7</b> Amount of Contribution (\$) \$150.00
	<b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77010	
<b>8</b> Principal occupation / Job title (See Instructions) Medical Supplies Salesperson		<b>9</b> Employer (See Instructions) Armstrong Medical Supply
<b>Date</b> 08/02/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Davis-Gilmore, Jacqueline	<b>Amount of Contribution (\$)</b> \$150.00
	<b>Contributor address; City; State; Zip Code</b>  Houston, TX 77004	
<b>Principal occupation / Job title (See Instructions)</b> Staff Member		<b>Employer (See Instructions)</b> Lone Star College North

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/1 Rpt: 5/8	<b>2</b> FILER NAME Black Women of Greater Houston PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00084977
<b>4</b> Date 09/04/2024	<b>5</b> Payee name Hillday Public Relations	
<b>6</b> Amount (\$) \$1,500.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3801 Kirby, Ste 507  Houston, TX 77098	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Congressional District 18 Candidates Forum
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/3 Rpt: 6/8		2 FILER NAME Black Women of Greater Houston PAC		3 Filer ID (Ethics Commission Filers) 00084977	
4 Date 09/03/2024		5 Payee name Club Express			
6 Amount (\$) 49.38 <input type="checkbox"/> Expenditure from corporate funds		7 Payee Address; City; State; Zip 1051 Perimeter Drive, Suite 350 Schaumburg, IL 60173			
8 PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) Fees	
Date 08/02/2024		Payee name Club Express			
Amount (\$) 49.28 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 1051 Perimeter Drive, Suite 350 Schaumburg, IL 60173			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Fees		(b) Description (See instructions regarding type of information required.) Fees	
Date 08/01/2024		Payee name Country Rose Garden			
Amount (\$) 250.00 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 4905 Fannin St. Houston, TX 77004			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Credit Card Payment		(b) Description (See instructions regarding type of information required.) Memorial Flowers	
Date 08/28/2024		Payee name Cricket Wireless			
Amount (\$) 55.00 <input type="checkbox"/> Expenditure from corporate funds		Payee Address; City; State; Zip 3139 W. Holcombe Blvd. Houston, TX 77025			
PURPOSE OF EXPENDITURE		(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense		(b) Description (See instructions regarding type of information required.) Phone	

# 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: 2/3 Rpt: 7/8	<b>2</b> FILER NAME Black Women of Greater Houston PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00084977
<b>4</b> Date 07/29/2024	<b>5</b> Payee name Cricket Wireless	
<b>6</b> Amount (\$) 55.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 3139 W. Holcombe Blvd.  Houston, TX 77025	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Credit Card Payment	<b>(b)</b> Description (See instructions regarding type of information required.) Phone
Date 09/20/2024	Payee name Mailchimp	
Amount (\$) 21.32 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 405 N. Angier Ave., NE  Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Mailbox
Date 07/22/2024	Payee name Mailchimp	
Amount (\$) 21.32 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 405 N. Angier Ave., NE  Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Credit Card Payment	<b>(b)</b> Description (See instructions regarding type of information required.) Mailbox
Date 08/19/2024	Payee name Mailchimp	
Amount (\$) 21.32 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 405 N. Angier Ave., NE  Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Credit Card Payment	<b>(b)</b> Description (See instructions regarding type of information required.) Marketing - Fees

# 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: 3/3 Rpt: 8/8	<b>2</b> FILER NAME Black Women of Greater Houston PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00084977
<b>4</b> Date 08/01/2024	<b>5</b> Payee name Sheila Jackson Lee Memorial Fund	
<b>6</b> Amount (\$) 1,500.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 4412 Alameda Road Houston, TX 77004	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Memorial Expense
Date 09/16/2024	Payee name Sign Up Genius Inc.	
Amount (\$) 11.99 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13777 Ballantyne Corporate Pl., Ste 500 Charlotte, NC 28277	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Credit Card Payment	<b>(b)</b> Description (See instructions regarding type of information required.) Mailbox
Date 08/15/2024	Payee name Sign Up Genius Inc.	
Amount (\$) 11.99 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 13777 Ballantyne Corporate Pl., Ste 500 Charlotte, NC 28277	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Credit Card Payment	<b>(b)</b> Description (See instructions regarding type of information required.) Fees
Date 08/20/2024	Payee name Tiff's Treats	
Amount (\$) 97.39 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 11200 Broadway St, #410 Pearland, TX 77584	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Credit Card Payment	<b>(b)</b> Description (See instructions regarding type of information required.) Event Expense