

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00061809	2 Total pages filed: 15	
3 COMMITTEE NAME TranSystems Corporation PAC			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/03/2024 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2400 Pershing Rd., Ste. 400 Kansas City, MO 64108			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Paul NICKNAME LAST SUFFIX Malir			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2400 Pershing Road Suite 400 Kansas City, MO 64108			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2400 Pershing Road Suite 400 Kansas City, MO 64108			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (816) 329-8700			
9 REPORT TYPE	<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			
10 PERIOD COVERED	Month Day Year Month Day Year 07/01/2024 THROUGH 09/26/2024			
11 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME TranSystems Corporation PAC		13 Filer ID (Ethics Commission Filers) 00061809
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 14,210.87
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 75,670.36
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
16 AFFIDAVIT <div style="text-align: right; margin-top: 20px;">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.</div> <div style="text-align: right; margin-top: 20px;">Paul Malir _____ Signature of Campaign Treasurer</div> <div style="margin-top: 20px;">AFFIX NOTARY STAMP / SEAL ABOVE</div> <div style="margin-top: 20px;">Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</div> <div style="margin-top: 20px; display: flex; justify-content: space-between;"><div>_____ Signature of officer administering oath</div><div>_____ Printed name of officer administering oath</div><div>_____ Title of officer administering oath</div></div>		

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 15

17 COMMITTEE NAME TranSystems Corporation PAC		18 Filer ID (Ethics Commission Filers) 00061809
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 14,210.87
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
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 checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 5,000.00
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/7 Rpt: 4/15
2 FILER NAME TranSystems Corporation PAC		3 Filer ID (Ethics Commission Filers) 00061809
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert, Tony (Mr.) <hr/> 6 Contributor address; City; State; Zip Code New Lenox, IL 60451	7 Amount of Contribution (\$) \$576.90
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biehl, Allen <hr/> Contributor address; City; State; Zip Code Medina, OH 44256	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) TranSystems
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, Michael <hr/> Contributor address; City; State; Zip Code Yorkville, IL 60560	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Assistant Vice President		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Engstrom, Slade <hr/> Contributor address; City; State; Zip Code Benton, KS 67017	Amount of Contribution (\$) \$480.00
Principal occupation / Job title (See Instructions) Senior Vice President		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farah, Nabil <hr/> Contributor address; City; State; Zip Code North Royalton, OH 44133	Amount of Contribution (\$) \$230.76
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) TranSystems

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/7 Rpt: 5/15
2 FILER NAME TranSystems Corporation PAC		3 Filer ID (Ethics Commission Filers) 00061809
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, James (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Boardman, OH 44512	7 Amount of Contribution (\$) \$450.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gartner, Chad <hr/> Contributor address; City; State; Zip Code Ft. Worth, TX 76107	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Larry <hr/> Contributor address; City; State; Zip Code Johns Island, SC 29455	Amount of Contribution (\$) \$360.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) TranSystems
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grow, John (Mr.) <hr/> Contributor address; City; State; Zip Code Oviedo, FL 32765	Amount of Contribution (\$) \$576.90
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) TranSystems
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hicks, Kevin <hr/> Contributor address; City; State; Zip Code LaVista, NE 68128	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Senior Vice President		Employer (See Instructions) TranSystems Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/7 Rpt: 6/15
2 FILER NAME TranSystems Corporation PAC		3 Filer ID (Ethics Commission Filers) 00061809
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jarvis, Jeff (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Mesa, AZ 85207	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirchner, Lawrence (Mr.) <hr/> Contributor address; City; State; Zip Code Chesterton, IN 46304	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krul, Brian (Mr.) <hr/> Contributor address; City; State; Zip Code Pittsburgh, PA 15237	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lackey, Jeff (Mr.) <hr/> Contributor address; City; State; Zip Code Conway Springs, KS 67031	Amount of Contribution (\$) \$230.76
Principal occupation / Job title (See Instructions) Principal/Sr. Vice President		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Letkowski, Brett (Mr.) <hr/> Contributor address; City; State; Zip Code Wichita, KS 67205	Amount of Contribution (\$) \$576.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) TranSystems Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/15
2 FILER NAME TranSystems Corporation PAC		3 Filer ID (Ethics Commission Filers) 00061809
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowell, Evan 6 Contributor address; City; State; Zip Code Hopkinton, ME 01748	7 Amount of Contribution (\$) \$600.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) TranSystems
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macander, Ryan Contributor address; City; State; Zip Code Western Springs, IL 60558	Amount of Contribution (\$) \$360.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malir, Paul (Mr.) Contributor address; City; State; Zip Code Lenexa, KS 66220	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) President/COO		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morsches, Richard (Mr.) Contributor address; City; State; Zip Code Arlington Heights, IL 60004	Amount of Contribution (\$) \$576.90
Principal occupation / Job title (See Instructions) Chairman of the Board		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munson, Tom (Mr.) Contributor address; City; State; Zip Code Sugarland, TX 77479	Amount of Contribution (\$) \$345.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) TranSystems Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/15
2 FILER NAME TranSystems Corporation PAC		3 Filer ID (Ethics Commission Filers) 00061809
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Gregory (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Columbus, OH 43221	7 Amount of Contribution (\$) \$700.00
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Neil, Joseph <hr/> Contributor address; City; State; Zip Code Camp Hill, PA 17011	Amount of Contribution (\$) \$450.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) TranSystems
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pucel, Zachary <hr/> Contributor address; City; State; Zip Code Shorewood, IL 60404	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Assistant Vice President		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rahall-Lunsford, Sarah <hr/> Contributor address; City; State; Zip Code Powell, OH 43065	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Sr. VP Sales and Strategy		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rock, Timothy <hr/> Contributor address; City; State; Zip Code Euless, TX 76039	Amount of Contribution (\$) \$576.90
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) TranSystems Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/15
2 FILER NAME TranSystems Corporation PAC		3 Filer ID (Ethics Commission Filers) 00061809
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santeford, Matthew <hr/> 6 Contributor address; City; State; Zip Code Elk Grove Village, IL 60007	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stenzel, Charles (Mr.) <hr/> Contributor address; City; State; Zip Code Arlington Heights, IL 60004	Amount of Contribution (\$) \$480.75
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stiles, Jeffrey (Mr.) <hr/> Contributor address; City; State; Zip Code Morristown, NJ 07960	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Senior Vice President		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strub, Peter (Mr.) <hr/> Contributor address; City; State; Zip Code Travelers Rest, SC 29670	Amount of Contribution (\$) \$576.90
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trimarco, Gina <hr/> Contributor address; City; State; Zip Code Western Springs, IL 60558	Amount of Contribution (\$) \$115.44
Principal occupation / Job title (See Instructions) Assistant Vice President		Employer (See Instructions) TranSystems Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/15
2 FILER NAME TranSystems Corporation PAC		3 Filer ID (Ethics Commission Filers) 00061809
4 Date 09/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Shawn <hr/> 6 Contributor address; City; State; Zip Code Baxter Springs, KS 66713	7 Amount of Contribution (\$) \$230.76
8 Principal occupation / Job title (See Instructions) Principal		9 Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wahlstedt, Michael (Mr.) <hr/> Contributor address; City; State; Zip Code Overland Park, KS 66210	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Senior Vice President		Employer (See Instructions) TranSystems Corporation
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weatherford, Franklin (Mr.) <hr/> Contributor address; City; State; Zip Code Chesterfield, MO 63017	Amount of Contribution (\$) \$576.90
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) TranSystems Corporation

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 11/15

2 FILER NAME
TranSystems Corporation PAC

3 Filer ID (Ethics Commission Filers)
00061809

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 12/15
2 FILER NAME TranSystems Corporation PAC		3 Filer ID (Ethics Commission Filers) 00061809
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/3 Rpt: 13/15	2 FILER NAME TranSystems Corporation PAC	3 Filer ID (Ethics Commission Filers) 00061809
4 Date 08/14/2024	5 Payee name David Linder Campaign Fund	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 471 West Columbia, TX 77486	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contributions
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2024	Payee name Friends of Kyle Mullins	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P O Box 72 Peckville, PA 18452	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contributions
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/20/2024	Payee name Friends of Timothy J. DeGeeter	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code Down Vista Oval Parma, OH 44129	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contributions
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/3 Rpt: 14/15	2 FILER NAME TranSystems Corporation PAC	3 Filer ID (Ethics Commission Filers) 00061809
4 Date 08/14/2024	5 Payee name Matt Sebasta Campaign	
6 Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 1893 Angleton, TX 77516	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/17/2024	Candidate/Officeholder name Roderick Miles Jr. Campaign	
Amount (\$) \$1,000.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought PO Box 51372 Ft. Worth, TX 76105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contributions
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/14/2024	Candidate/Officeholder name Ryan Cade Campaign	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought 10555 Westoffice Dr. Houston, TX 77042	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contributions
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/3 Rpt: 15/15	2 FILER NAME TranSystems Corporation PAC	3 Filer ID (Ethics Commission Filers) 00061809
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4 Date 08/14/2024	5 Payee name Stacy Adams Campaign
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6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3408 Nottingham Pearland, TX 77581
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contributions
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/14/2024	Payee name Voters for a Better Seminole County
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Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 11103 Hayes Street Tallahassee, FL 32301
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Contributions
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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