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) 00015702 3 COMMITTEE NAME **OFFICE USE ONLY** C Club Date Received **ELECTRONICALLY FILED** 10/07/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1661 Tanglewood Blvd. Date Hand-delivered or Date Postmarked Change of Address Houston, TX 77056 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Steven NAME NICKNAME LAST **SUFFIX** Birdwell STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1661 Tanglewood Blvd. STREET **ADDRESS** (Residence or Business) Houston, TX 77056 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1661 Tanglewood Blvd. MAILING **ADDRESS** Houston, TX 77056 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 875-9111 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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)	
C Club			00015702		
4 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported The Honorable Dan Crenshav	v Congressm	an District 2	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00	
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	16,000.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			
	4. TOTAL POLITICA	L EXPENDITURES	\$	126,658.20	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	r DAY \$	303,927.33	
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00	
6 AFFIDAVIT					
		I swear, or affirm, under penalty of pr true and correct and includes all info under Title 15, Election Code.			
			ven Birdwell ampaign Treasu	Iror	
AFFIX NOTA	RY STAMP / SEAL ABOVE	Signature of Ca	ampaign measc	nei	
Company to the state of the sta	and before the U.S.		4la i a 4la -	.1	
		which, witness my hand and seal of office.	uns the	day	
UI		milch, withess my hand and seal of office.			
Signature of officer	administering oath	Printed name of officer administering oath	Title of office	cer administering oath	
Signature of officer	administering oddi	Times hame of officer daministering oddi	THE OF OHIO	oor administering oddi	

FORM GPAC ADDENDUM

Page 3 of 28

					Fage 3 01 20
	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	C Club				00015702
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ms. Caroline Kane Congressma	n District 7
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures	A. Supported		
		(Describe by date and location of election and nature of issue.)			
			B. Opposed		
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE			The Henevelle Manner Levell C	Congress Pictuist C
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if	A. Supported	The Honorable Morgan Lutrell C	ongressman District 8
		applicable, classify by party.)			
	(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		
		3. Officeholders Assisted			
		(Identify by name or, if applicable, classify by party.)			
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Randy Weber C	ongressman District 14
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures	A. Supported		
		(Describe by date and location of election and nature of issue.)			
			B. Opposed		
		Officeholders Assisted (Identify by name or, if			
_		applicable, classify by party.)			

FORM GPAC ADDENDUM

Page 4 of 28

					Fage 4 01 20
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
C Club				00015702	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ms. Lana Centonze Congressm	an District 18	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	-	The Honorable Troy Nehls Con	nressman Distri	irt 22
ACTIVITY	(Identify by name or, if applicable, classify by party.)		The field date frequency come con-	grocoman Biodi	
(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			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		The Honorable Brian Babin Cor	ngressman Dist	rict 36
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 5 of 28

										Faye	5 3 01 2	.0
12	COMMITTEE NAME					:	13 Filer ID	(Ethics (Commiss	sion Filers	s)
	C Club						0001570)2				
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ed	The Honorable Wesley Hunt C	Con	gressman	Distr	ict 38			
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	d								
		2. Measures	A. Supporte	ed								
		(Describe by date and location of election and nature of issue.)										
			B. Opposed	d								
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)										
	COMMITTEE	1. Candidates		ed	Commissioner Christi Craddick	C R	Pailroad Co	mmis	ssione	r		
	ACTIVITY	(Identify by name or, if applicable, classify by party.)					iam odd Gol		5010110			
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	d								
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	ed								
			B. Opposed	d								
		3. Officeholders Assisted										
		(Identify by name or, if applicable, classify by party.)										
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		ed	Sen. Paul Bettencourt State Se	ena	ator					
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	d								
		2. Measures	A. Supporte	ed								
		(Describe by date and location of election and nature of issue.)										
			B. Opposed	d								
		3. Officeholders Assisted (Identify by name or, if										
		applicable, classify by party.)	<u> </u>									

FORM GPAC ADDENDUM

Page 6 of 28

						Fage 0 01 20
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	C Club				00015702	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Sen. Joan Huffman State Senat	or	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates		Rep. Steve Toth State Represe	atativo	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Nep. Sieve Tolli State Nepresel	itative	
	(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 ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Matt Morgan State Represe	ntative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		Officeholders Assisted (Identify by name or, if				
		applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 7 of 28

							rage / 0120
12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	C Club					00015702	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		d Mr. Jeff Barry	State Representa	tive	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and	A. Supported	i			
		nature of issue.)	B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE	Candidates		Rep. Sam Ha	rless State Repres	sentative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		- F	.,		
	(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	j			
			B. Opposed				
		Officeholders Assisted (Identify by name or, if					
		applicable, classify by party.)					
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		d Rep. Charles	Cunningham State	e Representativ	ve
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures	A. Supported	t			
		(Describe by date and location of election and nature of issue.)					
			B. Opposed				
		Officeholders Assisted (Identify by name or, if					
_		applicable, classify by party.)					

FORM GPAC ADDENDUM

Page 8 of 28

					Fage 0 01 20
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
C Club				00015702	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Rep. Briscoe Cain State Repres	sentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	Candidates		Don Donnis Daul State Donnes	ontativo	
ACTIVITY	(Identify by name or, if		Rep. Dennis Paul State Repres	entative	
	applicable, classify by party.)				
(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 ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Rep. Tom Oliverson State Repr	esentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 9 of 28

								rage 9 01 20
12	COMMITTEE NAME						13 Filer ID	(Ethics Commission Filers)
	C Club						00015702	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ed	Rep. Mike Schofield S	tate Repre	esentative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	d				
		Measures (Describe by date and	A. Support	ed				
		location of election and nature of issue.)						
			B. Oppose	d				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
	COMMITTEE	Candidates	<u> </u>	ed	Rep. Mano DeAyala S	tate Renr	esentative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		.ou	Trep. Mano Deryala 3	tate repr	cscritative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	d				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Support	ed				
			B. Oppose	d				
		3. Officeholders Assisted						
		(Identify by name or, if applicable, classify by party.)						
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ed	Rep. Lacey Hull State	Represer	itative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	d				
		2. Measures	A. Support	ed				
		(Describe by date and location of election and nature of issue.)						
			B. Oppose	d				
		Officeholders Assisted (Identify by name or, if)						
		applicable, classify by party.)						

FORM GPAC ADDENDUM

Page 10 of 28

						Fage 10 01 20
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	C Club				00015702	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Rep. Valoree Swanson State F	Representative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates		Ma Jamifar Caushau Caust O	f Amnagla Tuetie	
	ACTIVITY	(Identify by name or, if	A. Supported	Ms. Jennifer Caughey Court O	i Appeais, Justic	е
		applicable, classify by party.)				
	(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 ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mr. Andrew Johnson Court Of	Appeals, Justice	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		Officeholders Assisted (Identify by name or, if				
		applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 11 of 28

					rage II 01 20
COMMITTEE NAME					(Ethics Commission Filers)
C Club				00015702	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mr. Clint Morgan Court Of Appe	als, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	Candidates	A. Supported	Judge Kristin Guiney Court Of A	nneals Justice	
ACTIVITY	(Identify by name or, if		Judge Kristiii Guilley Court Of A	uppeais, Justice	
	applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ms. Susanna Dokupil Court Of A	Appeals, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 12 of 28

					Fage 12 01 20
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
C Club				00015702	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mr. Chad Bridges Court Of App	eals, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supported	Ms. Tonya McLaughlin Court O	f Anneale Tuetiα	<u> </u>
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Ms. Toriya McLaugriiii Court O	Appeais, Justic	,c
(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			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Ms. Maritza Antu Court Of Appe	eals, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				

					Page 13 01 28
12 COMMITTEE NAME C Club				13 Filer ID 00015702	(Ethics Commission Filers)
C Club				00015702	
applicable,	name or, if classify by party.)	oorted Ms. Katy Boa	atman Court Of App	eals, Justice	
(Attach lists on plain paper to complete this report if necessary.)	В. Орр	osed			
	by date and election and	ported			
	В. Орр	osed			
3. Offic Assis (Identify by applicable,					
COMMITTEE 1. Cano	lidates A Suni	oorted Mr. Brad Har	t Court Of Anneals	lustice	
ACTIVITY (Identify by	name or, if classify by party.)	orted Mil. Blau Hai	t Court Of Appeals,	, Justice	
(Attach lists on plain paper to complete this report if necessary.)	В. Орр	osed			
2. Meas (Describe It location of nature of is	by date and election and	oorted			
	В. Орр	osed			
COMMITTEE 1. Cand ACTIVITY (Identify by		ported Mr. Nile Cop	eland District Judge	2	
(Attach lists on plain paper to complete this report if necessary.)	В. Орр	osed			
2. Meat (Describe to location of nature of is	y date and election and sue.)				
	В. Орр	osed			

					Page 14 01 28
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
C Club				00015702	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ms. Kathryn Shuchart Lee Distri	ict Judge	
(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			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ms. Sonya Aston District Judge		
(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			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Will Archer District Judge		
(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			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

					Page 15 01 28
COMMITTEE NAME				13 Filer ID 00015702	(Ethics Commission Filers)
C Club				00013702	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Michael Landrum District Ju	dge	
(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			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if		Mr. Bruce Bain District Judge		
	applicable, classify by party.)				
(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			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Nathan Milliron District Judg	е	
(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			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 16 of 28

						Fage 10 01 20
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	C Club				00015702	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		d Mr. Brian Staley District Judge		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported	t		
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates		d Ms. Michele Oncken District Ju	dne	
	ACTIVITY	(Identify by name or, if		Wis. Wichele Officker District 30	uyc	
		applicable, classify by party.)				
	(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	d		
		,	B. Opposed			
		3. Officeholders Assisted				
		(Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Judge Aaron Burdette District J	udge	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported	d		
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		Officeholders Assisted (Identify by name or, if)				
		applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 17 of 28

					rage 17 01 20
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
C Club				00015702	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Lori DeAngelo District Ju	dge	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported	İ		
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	Candidates	A. Supported	Ludge Metthew Deposity Dietric	t ludge	
ACTIVITY	(Identify by name or, if		Judge Matthew Peneguy Distric	t Judge	
	applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported	I		
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		d Mr. Daniel Lemkuil District Judg	e	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported	1		
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 18 of 28

						Fage 10 01 20
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	C Club				00015702	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mr. Dan Simons District Attorne	у	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates		Ms. Linda Garcia Judge, Countr	v Criminal Cou	t No. 16
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		MS. Emat Garda Gauge, Count	y Chimilai Cou	t. 140. 15
	(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			
		3. Officeholders Assisted				
		(Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Ray Black Judge, County Pr	robate Court No). 5
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		Officeholders Assisted (Identify by name or, if)				
		applicable, classify by party.)				

					Page 19 01 28
COMMITTEE NAME				13 Filer ID 00015702	(Ethics Commission Filers)
C Club				00013702	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ms. Jacqueline Lucci Smith Co	ounty Attorney	
(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	1. Candidates	Δ Sunnorted	Mr. Mike Knox Sheriff		
ACTIVITY	(Identify by name or, if applicable, classify by party.)		WII. WIIKE KIIOX SHEIIII		
(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			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Steve Radack County Tax	Assessor-Collec	ctor
(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			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

						Page 20 of 28
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
C Club					0001570	2
ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Commissioner Tom Rams	sey Cou	unty Commis	ssioner Precinct 3
(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.)					
ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Lincoln Goodwin J	Justice o	of the Peace	, Pct. 4, Place 1
(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				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge James Lombardino	o Justic	e of the Pea	ice, Pct.5, Place 1
(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				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

						Page 21 of 28
12 COMMITTEE NAME				13	B Filer ID	(Ethics Commission Filers)
C Club					00015702	2
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Holly Williams	son Justice of t	he Peace,	Pct. 8, Place1
(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 ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Terry Allbritton (Constable Prec	inct 5	
(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.)					

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

					22 of 28
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethics Commiss	ion Filers)
c	Club		00015702		
19 SC	HEDULI	E SUBTOTALS		Τ	
l	ME OF		SUBTOTAL	AMOUNT	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	16,000.00
				,	-
2.	П	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		•	
۷.	Ш	SCHEDOLE AZ. NON-MONETARY (IN-MIND) POLITICAL CONTRIBOTIONS		\$	
_					
3.	Ш	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
		COLIEDURE C1. MONETARY CONTRIBUTIONS FROM CORRORATION OR LARC			
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	TK.	\$	
5.	П	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	TION OR	\$	
		LABOR ORGANIZATION			
_	П	SCHEDULE C2: MONETARY SURPORT FROM CORRORATION OF LABOR ORC	ANIIZATIONI		
6.	Ш	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR			
7.	Ш	ORGANIZATION		\$	
8.	П	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.	П	SCHEDULE E: LOANS		\$	
J .	ш	SCHEDGEE E. LOANS		Φ	
			_		
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	o ·	\$	126,658.20
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
-					
12.	П	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
				,	
13.	П	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		•	
15.	Ш	SCHEDOLET 4. EXPENDITORES WADE BY CREDIT CARD		\$	
14.	Ш	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
		COLIEDING IV. INTEREST OFFICE OATES PERINDS AND CONTRIBUTIONS	OCTUDNES.		
15.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	818.98
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l					
l					
l					
ı					

	MONEI	Α	RY POLITICAL C	ONTRIBUTIO	N N			SCHEDUL	E A1
	The Instru	cti	on Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 23/28	
2	FILER NAME C Club						3	Filer ID (Ethics Commission 00015702	on Filers)
4	Date 09/09/2024	5 6	Full name of contributor Barrett, Seth Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)	7	Amount of Contribution (\$)	\$3,000.00
			Houston, TX 77056						
8	Principal occu Partner	pat	ion / Job title (See Instructions)		9	Employer (See Instructions Sabine Property Partner		LC	
	Date 08/27/2024		Full name of contributor Bissinger, David (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$3,000.00
	Principal occu	pat	Houston, TX 77019 ion / Job title (See Instructions)			Employer (See Instructions)		
	Partner					Bissinger, Oshman, Willi	ian	ns & Strasburger LLP	
	Date 08/27/2024		Full name of contributor Davidson, Josh (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$3,000.00
			Houston, TX 77002						
	Principal occu Attorney	pat	ion / Job title (See Instructions)			Employer (See Instructions Baker Botts LLP)		
	Date 08/27/2024		Full name of contributor Jones, Wade Contributor address; City; Sta Houston, TX 77079	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$3,000.00
	Principal occu Owner/Presi		ion / Job title (See Instructions) nt			Employer (See Instructions Infinity Hyrdorcarons LL			
	Date 07/29/2024		Full name of contributor Van Pelt, IV, William (Mr.) Contributor address; City; Sta Houston, TX 77002	out-of-state PAC (ID#: atte; Zip Code)		Amount of Contribution (\$)	\$4,000.00
			ion / Job title (See Instructions)			Employer (See Instructions		nios I td	
	Executive, I		Mid-Continent Companies,	Liu.		The Mid-Continent Com	μdl	iics, Liu.	

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

imbursement Solicitation/Fundraising Expense
transportation Equipment & Related Expense
Travel in District
Travel Out of District
tract Labor OTHER (enter 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: 1/4 Rpt: 24/28	C Club 00015702
4 Date	5 Payee name
07/24/2024	Dan Simons for Harris County DA
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,000.00	P.O. Box 62463
- "	
Expenditure from corporate funds	Houston, TX 77205
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Folitical Continuution
O Complete ONLY Station	Condidate/Officeholder name Office accepts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/24/2024	FP1 Digital, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$3,000.00	3001 Washington Blvd
Ψ0,000.00	7th Floor
Expenditure from	
corporate funds	Arlington, VA 22201
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Digital Consulting
	2. grada contocatang
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	o
Date	Payee name
08/06/2024	FP1 Digital, LLC
Amount (\$)	Payee address; City; State; Zip Code
\$3,000.00	3001 Washington Blvd
	7th Floor
Expenditure from corporate funds	Arlington, VA 22201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Digital Consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
SAPORALEIO TO BOHOIL O/OI	•

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment

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)

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/4 Rpt: 25/28	C Club	00015702
4 Date	5 Payee name	•
08/22/2024	FP1 Digital, LLC	
6 Amount (\$) \$80,000.00 Expenditure from corporate funds 8 PURPOSE	7 Payee address; City; State; Zip Co 3001 Washington Blvd 7th Floor Arlington, VA 22201 (a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Consulting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Design and build get out the vote digital campaign.
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held
Date	Payee name	
09/09/2024	FP1 Digital, LLC	
Amount (\$) \$3,000.00 Expenditure from corporate funds	Payee address; City; State; Zip Co 3001 Washington Blvd 7th Floor Arlington, VA 22201	de
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Digital Consulting
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sour	ght Office held
Date 09/24/2024	Payee name Harris County Repbulican Party	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Co 8588 Katy Fwy #445	de
Expenditure from corporate funds	Houston, TX 77024	
PURPOSE OF 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 For the benefit of all endorsed judicial candidates in Harris County as a slate.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 (order a category pot listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Men Legal Services		Printing Salarie		se s/Contract Labor		Travel Out of Di OTHER (enter a			
1	Total pages Schedule F1:	12	FILER NAMI		on Guide expi	ums now to	Compi		3	Filer ID	(Ethics Commission Filers)		
_	Sch: 3/4 Rpt: 26/28	_	C Club	_						00015702	(Luncs Commission Filers)		
4	Date	5	Payee name						<u> </u>				
	08/06/2024			Catherine (N	∕s.)								
6	Amount (\$)	7	Payee addre	ess; City;	5	State; Zip (Code						
	\$1,000.00		5538 Schu	macher Ln.									
	Expenditure from corporate funds		Houston, T	X 77056									
8	PURPOSE OF EXPENDITURE	(a)	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Tex Check if Austin, TX, officehold Administrative Work						officeholder livin				
9	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Off	iceholder nan	ne	Office s	ought			Office h	eld		
	Date		Payee name										
07/24/2024			McMahan, Catherine (Ms.)										
	Amount (\$)	H	Payee addre	ess; City;	9	State; Zip (Code						
	\$1,000.00		5538 Schul			, ,							
	·												
	Expenditure from corporate funds		Houston, T	X 77056									
	PURPOSE OF EXPENDITURE	(a)	Category (S Salaries/W	ee Categories list ages/Contra		nis schedule)	(b)		, TX,	officeholder livin	nplete Schedule T. g expense		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder nan	пе	Office s	ought			Office h	eld		
	Date		Payee name										
	09/09/2024		McMahan,	Catherine (N	/Is.)								
	Amount (\$)		Payee address; City; State; Zip Code										
	\$1,000.00		5538 Schui	macher Ln.									
	Expenditure from corporate funds		Houston, T	X 77056									
	PURPOSE OF EXPENDITURE	(a)	Category (S Salaries/W	ee Categories list ages/Contra		nis schedule)	(b)	ш	, TX,	officeholder livin	nplete Schedule T. g expense		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder nan	пе	Office s	 ought			Office h	eld		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 (enter a category not listed above)

Consulting Expense 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: 4/4 Rpt: 27/28	C Club 00015702						
4 Date	5 Payee name						
08/20/2024	Mike Knox for Harris County Sheriff						
6 Amount (\$)	7 Payee address; City; State; Zip Code						
\$10,000.00	7941 Katy Freeway, #108						
Expenditure from corporate funds	Houston, TX 77024						
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Contributions/Donations Made By						
	Candidate/Officeholder/Political Committee						
	Political Contribution						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
Complete ONLY if direct expenditure to benefit C/O							
Date	Payee name						
08/06/2024	River Oaks Country Club						
Amount (\$)	Payee address; City; State; Zip Code						
\$5,054.26	1600 River Oaks Blvd.						
Expenditure from corporate funds	Houston, TX 77019						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Event Expense						
EXI ENDITORE	Check if Austin, TX, officeholder living expense						
	Lunch Meeting						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH							
Date	Payee name						
09/09/2024	River Oaks Country Club						
Amount (\$) Payee address; City; State; Zip Code							
\$4,603.94	1600 River Oaks Blvd.						
Expenditure from corporate funds	Houston, TX 77019						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.						
	Check if Austin, TX, officeholder living expense Lunch Meeting						
	Eurich Meeting						
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/O							

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 28/28 2 FILER NAME 3 Filer ID (Ethics Commission Filers) C Club 00015702 Date 8 Amount (\$) 5 Name of person from whom amount is received 07/29/2024 Texas Gulf Bank \$402.18 6 Address of person from whom amount is received; City; State; Zip Code Angleton, TX 77515 Purpose for which amount is received Check if political contribution returned to filer Interest Paid Amount (\$) Date Name of person from whom amount is received 08/29/2024 Texas Gulf Bank \$416.80 Address of person from whom amount is received; City; State; Zip Code Angleton, TX 77515 Purpose for which amount is received Check if political contribution returned to filer Interest Paid