

SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC
COVER SHEET PG 1

The SPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00088967	2 Total pages filed: 8
3 COMMITTEE NAME Vote For Rockwall ISD			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/04/2024 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 PO Box 302 Rockwall, TX 75087		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Cori NICKNAME LAST SUFFIX Higgins		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2625 Desert Falls Lane Rockwall, TX 75087		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 302 Rockwall, TX 75087		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 577-7007		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination		
10 PERIOD COVERED	Month Day Year 07/01/2024 THROUGH 10/03/2024		
11 ELECTION	ELECTION DATE Month Day Year 11/05/2024	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **SPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Vote For Rockwall ISD		13 Filer ID (Ethics Commission Filers) 00088967		
14 COMMITTEE PURPOSE (Attach lists on plain paper to complete this report if necessary.) <input checked="" type="checkbox"/> SUPPORT (Candidate or Measure) <input type="checkbox"/> OPPOSE (Candidate or Measure) <input type="checkbox"/> ASSIST (Officeholder)	<input type="checkbox"/> Candidate <input type="checkbox"/> Officeholder	CANDIDATE / OFFICEHOLDER NAME		
		OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)		
	<input checked="" type="checkbox"/> Measure	BALLOT IDENTIFICATION / # RW ISD		ELECTION DATE Month Day Year 11/05/2024
		DESCRIPTION Prop A, B, C, D		
15 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED		\$ 0.00	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 123,988.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$ 0.00	
	4. TOTAL POLITICAL EXPENDITURES		\$ 0.00	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 123,931.00	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 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.

Mrs. Cori Higgins

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 - SPAC**FORM SPAC**
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17 COMMITTEE NAME Vote For Rockwall ISD	18 Filer ID (Ethics Commission Filers) 00088967
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19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 155.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 123,833.00
5. <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6. <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
7. <input type="checkbox"/> SCHEDULE E: LOANS	\$
8. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
9. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
10. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
11. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
12. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
13. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 57.00
14. <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: 1/1 Rpt: 4/8
2 FILER NAME Vote For Rockwall ISD		3 Filer ID (Ethics Commission Filers) 00088967
4 Date 10/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Finley, Kerry <hr/> 6 Contributor address; City; State; Zip Code McClendon-Chisholm, TX 75032	7 Amount of Contribution (\$) \$55.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Marie <hr/> Contributor address; City; State; Zip Code Heath, TX 75126	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/3 Rpt: 5/8
2 FILER NAME Vote For Rockwall ISD		3 Filer ID (Ethics Commission Filers) 00088967
4 Date 09/30/2024	5 Corporation / Labor Organization name 3D Mechanical Plumbing Inc. <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code Kauffman, TX 75142	7 Amount of contribution (\$) \$2,500.00
Date 10/03/2024	Corporation / Labor Organization name AVAddek <hr/> Corporation / Labor Organization address; City; State; Zip Code Webster, TX 77598	Amount of contribution (\$) \$2,500.00
Date 09/30/2024	Corporation / Labor Organization name Baker Drywall Dallas LTD <hr/> Corporation / Labor Organization address; City; State; Zip Code Mesquite, TX 75150	Amount of contribution (\$) \$10,000.00
Date 09/30/2024	Corporation / Labor Organization name CEO Strohmeier Architects <hr/> Corporation / Labor Organization address; City; State; Zip Code Rockwall, TX 75032	Amount of contribution (\$) \$5,000.00
Date 10/03/2024	Corporation / Labor Organization name CORE Construction Services of TX <hr/> Corporation / Labor Organization address; City; State; Zip Code Frisco, TX 75033	Amount of contribution (\$) \$5,000.00
Date 10/03/2024	Corporation / Labor Organization name CT Excavating Inc <hr/> Corporation / Labor Organization address; City; State; Zip Code Greenville, TX 75402	Amount of contribution (\$) \$500.00
Date 10/03/2024	Corporation / Labor Organization name Corgan Associates, Inc <hr/> Corporation / Labor Organization address; City; State; Zip Code Dallas, TX 75202	Amount of contribution (\$) \$50,000.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 2/3 Rpt: 6/8
2 FILER NAME Vote For Rockwall ISD		3 Filer ID (Ethics Commission Filers) 00088967
4 Date 09/27/2024	5 Corporation / Labor Organization name EMA Engineering & Consulting 6 Corporation / Labor Organization address; City; State; Zip Code Tyler, TX 75702	7 Amount of contribution (\$) \$5,000.00
Date 09/30/2024	Corporation / Labor Organization name Gentzler Electrical Services Corporation / Labor Organization address; City; State; Zip Code Dallas, TX 75355	Amount of contribution (\$) \$2,500.00
Date 09/24/2024	Corporation / Labor Organization name J&E Companies Corporation / Labor Organization address; City; State; Zip Code Grand Prairie, TX 75050	Amount of contribution (\$) \$10,000.00
Date 09/25/2024	Corporation / Labor Organization name John Cook & Associates Inc Corporation / Labor Organization address; City; State; Zip Code Dallas, TX 75336	Amount of contribution (\$) \$3,333.00
Date 09/25/2024	Corporation / Labor Organization name Lasco Acoustics and Dry Wall Corporation / Labor Organization address; City; State; Zip Code Carrollton, TX 75006	Amount of contribution (\$) \$5,000.00
Date 09/30/2024	Corporation / Labor Organization name Miller Sierra Contractors Inc Corporation / Labor Organization address; City; State; Zip Code Euless, TX 76040	Amount of contribution (\$) \$10,000.00
Date 09/30/2024	Corporation / Labor Organization name Northstar Builders Group Corporation / Labor Organization address; City; State; Zip Code Coppell, TX 75019	Amount of contribution (\$) \$10,000.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE **C1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule C1:
Sch: 3/3 Rpt: 7/8

2 FILER NAME
Vote For Rockwall ISD

3 Filer ID (Ethics Commission Filers)
00088967

4 Date
09/30/2024

5 Corporation / Labor Organization name
Tri-Plase Interiors, LLC

6 Corporation / Labor Organization address; City; State; Zip Code

Wylie, TX 75098

7 Amount of contribution (\$)
\$2,500.00

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt: 8/8	2 FILER NAME Vote For Rockwall ISD	3 Filer ID (Ethics Commission Filers) 00088967
4 Date 08/28/2024	5 Payee name USPS	
6 Amount (\$) 57.00	7 Payee Address; City; State; Zip 609 S Goliad Street Rockwall, TX 75087	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Secured a PO Box for a 3 month rental.