

# 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) 00088769	2 Total pages filed: 34	
3 COMMITTEE NAME Cameron County Democrats PAC			<b>OFFICE USE ONLY</b> Date Received ELECTRONICALLY FILED 10/07/2024 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 1150 N. Loope 1604 West Suite 108-230 San Antonio, TX 78248			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Christopher NICKNAME LAST SUFFIX Koob			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1150 N. Loope 1604 West Ste. 108-230 San Antonio, TX 78248			
7 CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1150 N. Loope 1604 West Ste. 108-230 San Antonio, TX 78248			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (202) 552-0221			
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 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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# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Cameron County Democrats PAC		<b>13 Filer ID</b> (Ethics Commission Filers) 00088769
<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
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 400,678.70
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 203,022.60
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 172,895.90
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00
<b>16 AFFIDAVIT</b>  <p>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.</p> <p style="text-align: right;">Christopher Koob _____ Signature of Campaign Treasurer</p> <p>AFFIX NOTARY STAMP / SEAL ABOVE</p> <p>Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.</p> <p>_____ Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath</p>		

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
3 of 34

<b>17 COMMITTEE NAME</b> Cameron County Democrats PAC		<b>18 Filer ID</b> (Ethics Commission Filers) 00088769
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 320,000.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 70,678.70
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 10,000.00
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	\$ 203,022.60
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 type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 3,609.99

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 1/1 Rpt: 4/34

2 FILER NAME

Cameron County Democrats PAC

3 Filer ID (Ethics Commission Filers)  
00088769

4 Date

08/30/2024

5 Full name of contributor

Texas Majority PAC

☐ out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of Contribution (\$)

\$200,000.00

6 Contributor address; City; State; Zip Code

Washington, DC 20003

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

09/26/2024

Full name of contributor

Texas Majority PAC

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of Contribution (\$)

\$120,000.00

Contributor address; City; State; Zip Code

Washington, DC 20003

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/3 Rpt: 5/34	
2 FILER NAME Cameron County Democrats PAC		3 Filer ID (Ethics Commission Filers) 00088769	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 09/05/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Majority PAC 7 Contributor address; City; State; Zip Code  Washington, DC 20003	8 Amount of contribution (\$) \$1,178.69	9 In-kind contribution description Texting Services
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Majority PAC Contributor address; City; State; Zip Code  Washington, DC 20003	Amount of contribution (\$) \$550.01	In-kind contribution description Texting Services
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Majority PAC Contributor address; City; State; Zip Code  Washington, DC 20003	Amount of contribution (\$) \$21,150.00	In-kind contribution description Field Consulting
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 2/3 Rpt: 6/34	
2 FILER NAME Cameron County Democrats PAC		3 Filer ID (Ethics Commission Filers) 00088769	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 09/05/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Majority PAC 7 Contributor address; City; State; Zip Code  Washington, DC 20003	8 Amount of contribution (\$) \$45,000.00	9 In-kind contribution description Field Consulting
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Majority PAC Contributor address; City; State; Zip Code  Washington, DC 20003	Amount of contribution (\$) \$1,000.00	In-kind contribution description Staff Time
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Majority PAC Contributor address; City; State; Zip Code  Washington, DC 20003	Amount of contribution (\$) \$450.00	In-kind contribution description Staff Time
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 3/3 Rpt: 7/34	
2 FILER NAME Cameron County Democrats PAC		3 Filer ID (Ethics Commission Filers) 00088769	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 08/15/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Majority PAC 7 Contributor address; City; State; Zip Code  Washington, DC 20003	8 Amount of contribution (\$) \$450.00	9 In-kind contribution description Staff Time
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Majority PAC Contributor address; City; State; Zip Code  Washington, DC 20003	Amount of contribution (\$) \$450.00	In-kind contribution description Staff Time
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 07/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Majority PAC Contributor address; City; State; Zip Code  Washington, DC 20003	Amount of contribution (\$) \$450.00	In-kind contribution description Staff Time
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE **C1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule C1:  
Sch: 1/1 Rpt: 8/34

2 FILER NAME

Cameron County Democrats PAC

3 Filer ID (Ethics Commission Filers)  
00088769

4 Date

07/26/2024

5 Corporation / Labor Organization name

Texas Majority

7 Amount of contribution (\$)

\$10,000.00

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

Washington, DC 20003



# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/25 Rpt: 9/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 09/20/2024	<b>5</b> Payee name 1848 BBQ	
<b>6</b> Amount (\$) \$537.12  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 5 Avalon Dr  Brownsville, TX 78520	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising 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 Catering
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/04/2024	Candidate/Officeholder name All Valley Media LLC	
Amount (\$) \$336.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 32158 Zillock Rd  San Benito, TX 78586	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting 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 Graphic Design Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/27/2024	Candidate/Officeholder name AmTrust Financial Services Inc	
Amount (\$) \$352.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 59 Maiden Lane  New York, NY 10038	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Workers' Compensation
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: 2/25 Rpt: 10/34	2 FILER NAME Cameron County Democrats PAC	3 Filer ID (Ethics Commission Filers) 00088769
4 Date 07/26/2024	5 Payee name Amalgamated Bank	
6 Amount (\$) \$14.00 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 275 7th Ave  New York, NY 10001	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 07/26/2024	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$32.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 275 7th Ave  New York, NY 10001	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
Complete ONLY if direct expenditure to benefit C/OH		
Date 08/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name Amalgamated Bank		
Amount (\$) \$14.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 275 7th Ave  New York, NY 10001	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
Complete ONLY 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.

<b>1</b> Total pages Schedule F1: Sch: 3/25 Rpt: 11/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 08/29/2024	<b>5</b> Payee name Amalgamated Bank	
<b>6</b> Amount (\$) \$14.00	<b>7</b> Payee address; City; State; Zip Code 275 7th Ave  New York, NY 10001	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<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 Bank Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/26/2024	Candidate/Officeholder name	Office sought
Payee name Amalgamated Bank	Office held	
Amount (\$) \$14.00	Payee address; City; State; Zip Code 275 7th Ave  New York, NY 10001	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/26/2024	Candidate/Officeholder name	Office sought
Payee name Amalgamated Bank	Office held	
Amount (\$) \$48.25	Payee address; City; State; Zip Code 275 7th Ave  New York, NY 10001	
<input type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/26/2024	Candidate/Officeholder name	Office sought
Payee name Amalgamated Bank	Office held	
Amount (\$) \$48.25	Payee address; City; State; Zip Code 275 7th Ave  New York, NY 10001	
<input type="checkbox"/> Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank Fees
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.

<b>1</b> Total pages Schedule F1: Sch: 4/25 Rpt: 12/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 08/28/2024	<b>5</b> Payee name Amazon	
<b>6</b> Amount (\$) \$15.49  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office Supplies
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/28/2024	Candidate/Officeholder name Office sought Office held	
Payee name Amazon		
Amount (\$) \$156.94  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/28/2024	Candidate/Officeholder name Office sought Office held	
Payee name Amazon		
Amount (\$) \$173.18  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/28/2024	Candidate/Officeholder name Office sought Office held	
Payee name Amazon		
Amount (\$) \$173.18  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
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.

<b>1</b> Total pages Schedule F1: Sch: 5/25 Rpt: 13/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 08/05/2024	<b>5</b> Payee name Best Buy	
<b>6</b> Amount (\$) \$2,319.76  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 7601 Penn Ave S  Richfield, MN 55423	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office Supplies
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/07/2024	Payee name Blue Dog Ink	
Amount (\$) \$3,741.98  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 20533 Biscayne Blvd Suite 4-1136 Aventura, FL 33180	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/04/2024	Payee name Blue Dog Ink	
Amount (\$) \$1,933.24  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 20533 Biscayne Blvd Suite 4-1136 Aventura, FL 33180	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 Printing
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.

<b>1</b> Total pages Schedule F1: Sch: 6/25 Rpt: 14/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 09/06/2024	<b>5</b> Payee name Blue Dog Ink	
<b>6</b> Amount (\$) \$1,459.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 20533 Biscayne Blvd Suite 4-1136 Aventura, FL 33180	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 Printing
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/15/2024	Candidate/Officeholder name Payee name Brownsville Public Utilities	
Amount (\$) \$82.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1425 Robinhood Dr Brownsville, TX 78521	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Utilities
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/14/2024	Candidate/Officeholder name Payee name Brownsville Public Utilities	
Amount (\$) \$94.31  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1425 Robinhood Dr Brownsville, TX 78521	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Utilities
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.

<b>1</b> Total pages Schedule F1: Sch: 7/25 Rpt: 15/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 09/13/2024	<b>5</b> Payee name Brownsville Public Utilities	
<b>6</b> Amount (\$) \$77.54  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1425 Robinhood Dr  Brownsville, TX 78521	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Utilities
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/31/2024	Candidate/Officeholder name Chavez, Oziel	
Amount (\$) \$5,270.50  <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
	Payee name Chavez, Oziel	
	Payee address; City; State; Zip Code 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Salaries
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/15/2024	Candidate/Officeholder name Chavez, Oziel	
Amount (\$) \$1,385.25  <input type="checkbox"/> Expenditure from corporate funds	Office sought Office held	
	Payee name Chavez, Oziel	
	Payee address; City; State; Zip Code 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Salaries
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.

<b>1</b> Total pages Schedule F1: Sch: 8/25 Rpt: 16/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 08/30/2024	<b>5</b> Payee name Chavez, Oziel	
<b>6</b> Amount (\$) \$1,385.25  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<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 Campaign Staff Salaries
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/13/2024	Candidate/Officeholder name Chavez, Oziel	
Amount (\$) \$1,385.25  <input type="checkbox"/> Expenditure from corporate funds	Office sought 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Salaries
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/05/2024	Candidate/Officeholder name GoDaddy	
Amount (\$) \$44.34  <input type="checkbox"/> Expenditure from corporate funds	Office sought 2155 E. GoDaddy Way Tempe, AZ 85284	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
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.

<b>1</b> Total pages Schedule F1: Sch: 9/25 Rpt: 17/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 07/05/2024	<b>5</b> Payee name GoDaddy	
<b>6</b> Amount (\$) \$63.68  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2155 E. GoDaddy Way  Tempe, AZ 85284	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Software Subscription	<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 Software Subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/16/2024	Candidate/Officeholder name Office sought Office held	
Payee name GoDaddy		
Amount (\$) \$99.99  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2155 E. GoDaddy Way  Tempe, AZ 85284	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2024	Candidate/Officeholder name Office sought Office held	
Payee name GoDaddy		
Amount (\$) \$60.67  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2155 E. GoDaddy Way  Tempe, AZ 85284	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
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.

<b>1</b> Total pages Schedule F1: Sch: 10/25 Rpt: 18/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 09/09/2024	<b>5</b> Payee name GoDaddy	
<b>6</b> Amount (\$) \$255.46  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2155 E. GoDaddy Way  Tempe, AZ 85284	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Software Subscription	<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 Software Subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/11/2024	Candidate/Officeholder name Office sought Office held	
Payee name H-E-B		
Amount (\$) \$99.23  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 646 S Flores St  San Antonio, TX 78204	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage 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 Meals
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/30/2024	Candidate/Officeholder name Office sought Office held	
Payee name Longhorn Organizing Strategies		
Amount (\$) \$150,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3120 Southwest Fwy Ste 101 PMB 693824 Houston, TX 77098	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting 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 Field Consulting
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.

<b>1</b> Total pages Schedule F1: Sch: 11/25 Rpt: 19/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 07/30/2024	<b>5</b> Payee name MBA Consulting Group	
<b>6</b> Amount (\$) \$2,500.00  <input checked="" type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 611 Pennsylvania Ave SE # 143 Washington, DC 20003	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting 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 Compliance Services
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/05/2024	Candidate/Officeholder name Office sought Office held	
Payee name MBA Consulting Group		
Amount (\$) \$2,500.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 611 Pennsylvania Ave SE # 143 Washington, DC 20003	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Compliance Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/08/2024	Candidate/Officeholder name Office sought Office held	
Payee name Mailchimp		
Amount (\$) \$28.25  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
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.

<b>1</b> Total pages Schedule F1: Sch: 12/25 Rpt: 20/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 08/09/2024	<b>5</b> Payee name Mailchimp	
<b>6</b> Amount (\$) \$28.25  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 405 N Angier Ave NE  Atlanta, GA 30308	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Software Subscription	<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 Software Subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2024	Candidate/Officeholder name Office sought Office held	
Payee name Mailchimp		
Amount (\$) \$28.25  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 405 N Angier Ave NE  Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/01/2024	Candidate/Officeholder name Office sought Office held	
Payee name O'Leary's Bar and Grille		
Amount (\$) \$88.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 600 Springmart Blvd #8  Brownsville, TX 78526	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals
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.

<b>1</b> Total pages Schedule F1: Sch: 13/25 Rpt: 21/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 07/15/2024	<b>5</b> Payee name Payroll Data Processing	
<b>6</b> Amount (\$) \$62.73  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<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 Payroll Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/31/2024	Candidate/Officeholder name Office sought Office held	
Payee name Payroll Data Processing		
Amount (\$) \$68.23  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/14/2024	Candidate/Officeholder name Office sought Office held	
Payee name Payroll Data Processing		
Amount (\$) \$50.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Fee
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.

<b>1</b> Total pages Schedule F1: Sch: 14/25 Rpt: 22/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 08/29/2024	<b>5</b> Payee name Payroll Data Processing	
<b>6</b> Amount (\$) \$50.48  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<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 Payroll Fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/12/2024	Candidate/Officeholder name Office sought Office held	
Payee name Payroll Data Processing		
Amount (\$) \$50.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/15/2024	Candidate/Officeholder name Office sought Office held	
Payee name Payroll Data Processing		
Amount (\$) \$580.09  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
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.

<b>1</b> Total pages Schedule F1: Sch: 15/25 Rpt: 23/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 07/31/2024	<b>5</b> Payee name Payroll Data Processing	
<b>6</b> Amount (\$) \$1,919.58  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<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 Payroll Taxes
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/14/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$805.40  <input type="checkbox"/> Expenditure from corporate funds	Payee name Payroll Data Processing  Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/29/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$799.40  <input type="checkbox"/> Expenditure from corporate funds	Payee name Payroll Data Processing  Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
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.

<b>1</b> Total pages Schedule F1: Sch: 16/25 Rpt: 24/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 09/12/2024	<b>5</b> Payee name Payroll Data Processing	
<b>6</b> Amount (\$) \$758.90  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4224 Henderson Blvd  Tampa, FL 33629	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<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 Payroll Taxes
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name Printplace		
Amount (\$) \$9,820.55  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 8000 Haskell Ave  Van Nuys, CA 91406	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name Sam's Club		
Amount (\$) \$136.27  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2101 SE Simple Savings Dr  Bentonville, AR 72712	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Office Supplies
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.

<b>1</b> Total pages Schedule F1: Sch: 17/25 Rpt: 25/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 07/03/2024	<b>5</b> Payee name Scale to Win	
<b>6</b> Amount (\$) \$846.39  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 13742 Harper St  Santa Ana, CA 92703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting 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 Texting Services
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/10/2024	Payee name Spectrum	
Amount (\$) \$90.32  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Washington Blvd  Stamford, CT 06902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Internet Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/12/2024	Payee name Spectrum	
Amount (\$) \$85.29  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Washington Blvd  Stamford, CT 06902	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Internet Services
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: 18/25 Rpt: 26/34	2 FILER NAME Cameron County Democrats PAC	3 Filer ID (Ethics Commission Filers) 00088769
4 Date 08/13/2024	5 Payee name Spectrum	
6 Amount (\$) \$130.48  <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 400 Washington Blvd  Stamford, CT 06902	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet Services
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 09/10/2024	Candidate/Officeholder name Office sought Office held	
Payee name Spectrum		
Amount (\$) \$85.30  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 Washington Blvd  Stamford, CT 06902	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet Services
Complete ONLY if direct expenditure to benefit C/OH		
Date 08/21/2024	Candidate/Officeholder name Office sought Office held	
Payee name Staples		
Amount (\$) \$414.55  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 500 Staples Dr  Framingham, MA 01702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office Supplies
Complete ONLY 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.

<b>1</b> Total pages Schedule F1: Sch: 19/25 Rpt: 27/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 07/18/2024	<b>5</b> Payee name Star AC & Electric	
<b>6</b> Amount (\$) \$975.33  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 2320 Nannete Ave  Brownsville, TX 78526	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Utilities
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2024	Payee name State Farm	
Amount (\$) \$52.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1 State Farm Plaza  Bloomington, IL 61710	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Insurance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/03/2024	Payee name Textedly	
Amount (\$) \$26.60  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1901 Avenue of the Stars Ste 200 Los Angeles, CA 90067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
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.

<b>1</b> Total pages Schedule F1: Sch: 20/25 Rpt: 28/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 07/08/2024	<b>5</b> Payee name Textedly	
<b>6</b> Amount (\$) \$59.58  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1901 Avenue of the Stars Ste 200 Los Angeles, CA 90067	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Software Subscription	<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 Software Subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/29/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$26.60  <input type="checkbox"/> Expenditure from corporate funds	Payee name Textedly  Payee address; City; State; Zip Code 1901 Avenue of the Stars Ste 200 Los Angeles, CA 90067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/07/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$59.58  <input type="checkbox"/> Expenditure from corporate funds	Payee name Textedly  Payee address; City; State; Zip Code 1901 Avenue of the Stars Ste 200 Los Angeles, CA 90067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
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.

<b>1</b> Total pages Schedule F1: Sch: 21/25 Rpt: 29/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 08/30/2024	<b>5</b> Payee name Textedly	
<b>6</b> Amount (\$) \$26.60  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1901 Avenue of the Stars Ste 200 Los Angeles, CA 90067	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Software Subscription	<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 Software Subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/30/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$26.60  <input type="checkbox"/> Expenditure from corporate funds	Payee name Textedly  Payee address; City; State; Zip Code 1901 Avenue of the Stars Ste 200 Los Angeles, CA 90067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$59.58  <input type="checkbox"/> Expenditure from corporate funds	Payee name Textedly  Payee address; City; State; Zip Code 1901 Avenue of the Stars Ste 200 Los Angeles, CA 90067	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Software Subscription	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Software Subscription
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.

<b>1</b> Total pages Schedule F1: Sch: 22/25 Rpt: 30/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 09/16/2024	<b>5</b> Payee name Textedly	
<b>6</b> Amount (\$) \$26.60  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1901 Avenue of the Stars Ste 200 Los Angeles, CA 90067	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Software Subscription	<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 Software Subscription
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/21/2024	Payee name Uber	
Amount (\$) \$45.93  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St  San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/21/2024	Payee name Uber	
Amount (\$) \$46.92  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market St  San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Transportation Equipment And Related 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 Travel
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.

<b>1</b> Total pages Schedule F1: Sch: 23/25 Rpt: 31/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 07/03/2024	<b>5</b> Payee name Vistaprint	
<b>6</b> Amount (\$) \$356.12  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 75 Wyman Street Ste 100 Waltham, MA 02451	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 Printing
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/29/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$396.44  <input type="checkbox"/> Expenditure from corporate funds	Payee name Vistaprint  Payee address; City; State; Zip Code 75 Wyman Street Ste 100 Waltham, MA 02451	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/15/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1,489.04  <input type="checkbox"/> Expenditure from corporate funds	Payee name Whitman, Ben  Payee address; City; State; Zip Code 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Salaries
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.

<b>1</b> Total pages Schedule F1: Sch: 24/25 Rpt: 32/34	<b>2</b> FILER NAME Cameron County Democrats PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00088769
<b>4</b> Date 07/31/2024	<b>5</b> Payee name Whitman, Ben	
<b>6</b> Amount (\$) \$1,489.04  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<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 Campaign Staff Salaries
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/15/2024	Candidate/Officeholder name Whitman, Ben	
Amount (\$) \$1,489.04  <input type="checkbox"/> Expenditure from corporate funds	Office sought 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Salaries
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/30/2024	Candidate/Officeholder name Whitman, Ben	
Amount (\$) \$1,489.04  <input type="checkbox"/> Expenditure from corporate funds	Office sought 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Salaries
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: 25/25 Rpt: 33/34	2 FILER NAME Cameron County Democrats PAC	3 Filer ID (Ethics Commission Filers) 00088769
4 Date 09/13/2024	5 Payee name Whitman, Ben	
6 Amount (\$) \$1,489.04 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Staff Salaries
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:  
Sch: 1/1 Rpt: 34/34

2 FILER NAME

Cameron County Democrats PAC

3 Filer ID (Ethics Commission Filers)  
00088769

4 Date

09/04/2024

5 Name of person from whom amount is received

Blue Dog Ink

8 Amount (\$)

\$3,609.99

6 Address of person from whom amount is received; City; State; Zip Code

Aventura, FL 33180

7 Purpose for which amount is received

Refund from Vendor

☐ Check if political contribution returned to filer