#### FORM GPAC GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00088744 3 COMMITTEE NAME **OFFICE USE ONLY** Central Texas Democrats PAC Date Received **ELECTRONICALLY FILED** 10/07/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1150 N. Loop 1604 West Date Hand-delivered or Date Postmarked Ste. 108-230 Change of Address San Antonio, TX 78248 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Christopher NAME NICKNAME LAST **SUFFIX** Koob STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1150 N. Loop 1604 West STREET **ADDRESS** Ste. 108-230 (Residence or Business) San Antonio, TX 78248 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1150 N. Loop 1604 West MAILING **ADDRESS** Ste. 108-230 San Antonio, TX 78248 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (202) 552-0221 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) X **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2024 09/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

## FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)		
Central Texas Democi	rats PAC		00088744			
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed				
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)  qualifies for the higher itemization threshold	\$	0.00		
	2. TOTAL POLITICATION (OTHER THAN PLE	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	499,731.13		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				
	4. TOTAL POLITICA	L EXPENDITURES	\$	253,632.50		
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD				
OUTSTANDING LOAN TOTALS		6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD				
16 AFFIDAVIT			·			
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.				
		Christop	her Koob			
		Signature of Car	npaign Treasur	er		
AFFIX NOTAR	Y STAMP / SEAL ABOVE					
		, th	nis the	day		
of	, 20, to certify	which, witness my hand and seal of office.				
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of offic	er administering oath		

## **SUBTOTALS - GPAC**

## FORM GPAC COVER SHEET PG 3

					3 of 45
<b>17</b> CC	OMMITTI	EE NAME	18 Filer ID	(Ethics	Commission Filers)
Ce	entral Te	exas Democrats PAC	00088744		
		E SUBTOTALS SCHEDULE		SU	JBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	400,000.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	89,731.13	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	X	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	R	\$	10,000.00
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10	. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	253,632.50
11	. 🔲	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12	. 🔲	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15	. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	420.00
				-	

MONI	ETARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
The Ins	ruction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/45	
2 FILER NA	ME exas Democrats PAC		3 Filer ID (Ethics Commission Filers) 00088744
4 Date 08/20/20	5 Full name of contributor out-of-state PAC (ID# Texas Majority PAC 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$250,000.00	
8 Principal o	Washington, DC 20003 ccupation / Job title (See Instructions)	9 Employer (See Instructions	5)
	(200)		,
Date 09/26/20	Full name of contributor out-of-state PAC (ID#  Texas Majority PAC  Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$150,000.00
Dringing	Washington, DC 20003	Employer (Coo Instructions	
Рппсіраї (	ccupation / Job title (See Instructions)	Employer (See Instructions	b)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instru	iction Guide explains how to complete this f	1 Total pages Schedule A2: Sch: 1/3 Rpt: 5/45				
2 FILER NAME Central Tex	as Democrats PAC		3 Filer ID (Ethics Commission Filers) 00088744			
4	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$				
5 Date 09/05/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:</li></ul>		8 Amount of contribution (\$) 9 In-kind contribution description \$2,756.11   Texting Services			
	Washington, DC 20003		Check if travel outside of Texas. Complete Schedule T.			
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-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 contributo	or's spouse (if any) (FOR JUDICIAL)			
<b>16</b> If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>				
Date 08/01/2024	Full name of contributor out-of-state PAC (ID#: Texas Majority PAC Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$1,100.02   Texting Services			
	Washington, DC 20003		Check if travel outside of Texas. Complete Schedule T.			
Principal occı	upation / 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 contributo	or'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 out-of-state PAC (ID#: Texas Majority PAC Contributor address; City; State; Zip Code	)	Amount of In-kind contribution contribution (\$) description \$23,500.00   Field Consulting			
	Washington, DC 20003		Check if travel outside of Texas. Complete Schedule T.			
Principal occu	upation / 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)	ı				
l						

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 2/3 Rpt: 6/45					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
Central Texa	as Democrats PAC	00088744						
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$					
<b>5</b> Date	6 Full name of contributor  uut-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution contribution (\$) description					
09/05/2024	Texas Majority PAC		\$50,000.00 Field Consulting					
	7 Contributor address; City; State; Zip Code							
			l l					
	Washington, DC 20003		Check if travel outside of Texas. Complete Schedule T.					
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	. —					
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)					
	p.m.e.pa. 2000pa.io. (i		(					
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)					
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•						
Date	Full name of contributor  ut-of-state PAC (ID#:		Amount of In-kind contribution					
07/15/2024	Texas Majority PAC		contribution (\$) description \$2,250.00   Staff Time					
	Contributor address; City; State; Zip Code							
			į į					
	Washington, DC 20003		Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
O a materilla cata mila	and a collection (FOR MIDIOIAL)	Laure finance of a contribute	ode arrane (fram.) (FOR HUDIOIAL)					
Contributors	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
	- a o.ma, .a.r e. paron (e) (1. a.r,) (1. e.r. ee2.e							
Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of ! In-kind contribution					
07/31/2024	Texas Majority PAC		contribution (\$) description					
	Contributor address; City; State; Zip Code		\$2,250.00   Staff Time					
	Washington DC 20002							
Principal occu	Washington, DC 20003  upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  J-JUDICIAL) (See instructions)					
Principal occi	apation / Job title (FOR NON-JODICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See Instituctions)					
Contributor's	Contributor's principal occupation (FOR JUDICIAL)  Contributor's job title (FOR JUDICIAL) (See instructions)							
Contributor's	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)							
I								

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 3/3 Rpt: 7/45					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
	as Democrats PAC	00088744						
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$					
<b>5</b> Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution contribution (\$) description					
08/15/2024			\$2,250.00   Staff Time					
	7 Contributor address; City; State; Zip Code							
	Washington, DC 20003		Check if travel outside of Texas. Complete Schedule T.					
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-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 contribute	or's spouse (if any) (FOR JUDICIAL)					
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of In-kind contribution					
08/30/2024	Texas Majority PAC		contribution (\$) description \$2,250.00 Staff Time					
	Contributor address; City; State; Zip Code		φ <u>2,200.00                                </u>					
			į į					
	Washington, DC 20003		Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)					
If contributor	is a child law firm of parent(s) (if any) (EOR TUDICIAL)							
ii continuator	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date	Full name of contributor Out-of-state PAC (ID#:		Amount of In-kind contribution					
09/13/2024	Full name of contributor out-of-state PAC (ID#: Texas Majority PAC	)	contribution (\$) description					
00/10/101	Contributor address; City; State; Zip Code		\$3,375.00 Staff Time					
			į į					
			į į					
	Washington, DC 20003	1	Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)					
Contributor's	Contributor's principal occupation (FOR JUDICIAL)  Contributor's job title (FOR JUDICIAL) (See instructions)							
Contributor's	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)							
I								

## MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

### SCHEDULE C1

	The Instruc	cti	on Guide explains how to complete this form.	1	Total pages Schedule C1: Sch: 1/1 Rpt: 8/45			
2	FILER NAME			3	Filer ID (Ethics Commission Filers)			
	Central Texa	s [	Democrats PAC		00088744			
4	Date	5	Corporation / Labor Organization name	7	Amount of contribution (\$)			
	07/26/2024		Texas Majority		\$10,000.00			
		6	Corporation / Labor Organization address; City; State; Zip Code					
			Washington, DC 20003					

## SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/36 Rpt: 9/45	Central Texas Democrats PAC	00088744
4 Date	5 Payee name	•
08/19/2024	Allen R Baca Center	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$10.00	301 W Bagdad Ave	
, , , , ,	3	
Expenditure from corporate funds	Round Rock, TX 78664	
8 PURPOSE		) Description
OF	(a) Category (See Categories listed at the top of this schedule)  Solicitation/Fundraising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Constant and along Expense	Check if Austin, TX, officeholder living expense
		Event Space Rental
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/O	-	
Date	Payee name	
08/19/2024	Allen R Baca Center	
Amount (\$)	Payee address; City; State; Zip Code	
\$230.00	301 W Bagdad Ave	
	-	
Expenditure from corporate funds	Round Rock, TX 78664	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b	) Description
EXPENDITURE	Solicitation/Fundraising Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Event Space Rental
		Event opass Nemai
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/O	•	
Date	Dove nome	
08/27/2024	Payee name AmTrust Financial Services	
Amount (\$)	Payee address; City; State; Zip Code	
\$424.00	59 Maiden Lane	
Expenditure from		
corporate funds	New York, NY 10038	
PURPOSE OF	, ,	) Description
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Workers' Compensation
		p
Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
expenditure to benefit C/O		

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

se Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:		_
Sch: 2/36 Rpt: 10/45	Central Texas Democrats PAC 00088744	
4 Date	5 Payee name	
07/26/2024	Amalgamated Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$14.00	275 7th Ave	
Expenditure from corporate funds	New York, NY 10001	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Bank Fees	
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
experience to serious eye.		
Date	Payee name	
07/26/2024	Amalgamated Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$14.00	275 7th Ave	
X Expenditure from corporate funds	New York, NY 10001	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Bank Fees	
	Banki cos	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
D-1-	T -	_
Date	Payee name	
08/29/2024	Amalgamated Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$14.00	275 7th Ave	
Expenditure from		
corporate funds	New York, NY 10001	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense  Bank Fees	
	Bankrees	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		

### SCHEDULE F1

Advertising Expense Accounting/Banking Event Expense Fees

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nittee	Food/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	xpense		xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2 F	ILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 3/36 Rpt: 11/45	C	Central Texa	as Democrats PA	AC .					00088744	
4	Date	<b>5</b> P	ayee name								
	08/29/2024		malgamate	ed Bank							
6	Amount (\$)	<b>7</b> P	ayee addres	s; City;	State;	Zip Co	ode				
	\$14.25	2	.75 7th Ave								
Х	Expenditure from corporate funds	N	lew York, N	IY 10001							
8	PURPOSE	(a) C	Category (Se	e Categories listed at the	top of this sche	dule)	(b)	Description			
	OF EXPENDITURE	F	ees					Check if Austin,		de of Texas. Comp officeholder living	
								Bank Fees			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		undidate/Offic	eholder name	0	ffice sou	ght			Office he	eld
	Date	Р	ayee name					_			
	09/26/2024	Д	Amalgamate	ed Bank							
	Amount (\$)	Р	ayee addres	s; City;	State;	Zip Co	de				
	\$14.00	2	75 7th Ave								
_	Expenditure from										
Х	corporate funds	N	lew York, N	IY 10001							
	PURPOSE	(a) C	Category (Se	e Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE	F	ees					<b>=</b>		de of Texas. Comp	
								Bank Fees	, 1X,	officeholder living	expense
								_a 1 000			
	Complete ONLY if direct expenditure to benefit C/Oh		ındidate/Offic	ceholder name	0	ffice sou	ght			Office he	eld
	Date	Р	ayee name								
	09/26/2024		malgamate	ed Bank							
	Amount (\$)	Р	ayee addres	s; City;	State;	Zip Co	de				
	\$34.00	2	.75 7th Ave								
	Expenditure from corporate funds	N	lew York, N	IY 10001							
	PURPOSE	(a) C	Category (Se	e Categories listed at the	top of this sche	dule)	(b)	Description		<u> </u>	
	OF EXPENDITURE	F	ees					ш		de of Texas. Comp officeholder living	
								Bank Fees	, 1^,	omeenoider living	CAPCIISE
	Complete ONLY if direct expenditure to benefit C/Oh		ındidate/Offic	eholder name	0	ffice sou	ght			Office he	eld

## SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/36 Rpt: 12/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
08/13/2024	Amazon
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$48.70	410 Terry Ave N
- Evpanditura from	
Expenditure from corporate funds	Seattle, WA 98109
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Office Supplies
	Office Supplies
O Complete ONLY if direct	Condidate/Officeholder name Office sought Office hald
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/04/2024	Amazon
Amount (\$)	Payee address; City; State; Zip Code
\$97.40	410 Terry Ave N
Expenditure from corporate funds	Seattle, WA 98109
PURPOSE	· · · · · · · · · · · · · · · · · · ·
OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>1</del>
Date	Payoo namo
07/15/2024	Payee name Cavanagh, Brendan
Amount (\$)	Payee address; City; State; Zip Code
\$2,388.28	1150 N. Loop 1604 West
Expenditure from	Ste 108-230
corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
LA LADITORL	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitie to beliefft C/OI	'

### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Consulting Expense Contributions/ Donatio Candidate/Officeho Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	oense		kpense /ages/	e Contract Labor		Travel in District Travel Out of Dis OTHER (enter a		ted above)
1 Total pages Sche	dule F1:	2 FILER NAM		<u> </u>		•		2	Filer ID	(Ethics Com	ımission Filers)
Sch: 5/36 Rpt:			xas Democrats PAC	С				l	00088744	(=0.00000	
4 Date		5 Payee name						•			
07/31/2024		Cavanagh									
6 Amount (\$)		7 Payee addre	ess; City;	State;	Zip Co	de					
\$2,	709.68	1150 N. Lo	op 1604 West								
		Ste 108-23	·								
Expenditure from corporate funds			io, TX 78248								
8 PURPOSE		(a) Category	See Categories listed at the to	on of this sched	dule)	(b)	Description				
OF			ages/Contract Labo		,			outsio	de of Texas. Com	plete Schedule	Г.
EXPENDITURE							_		officeholder living	expense	
							Campaign Sta	aff s	Salaries		
Complete ONLY if expenditure to ber			ficeholder name	Of	ffice sou	ght			Office he	eld	
Date		Payee name	<del></del>								
08/15/2024		Cavanagh,	Brendan								
Amount (\$)		Payee addre		State:	Zip Co	de					
, ,	548.98	,	op 1604 West	Otato,	Z.p 00	uo					
Ψ2,	340.90		·								
Expenditure from		Ste 108-23									
corporate funds		San Anton	io, TX 78248								
PURPOSE		(a) Category (	See Categories listed at the to	op of this sched	dule)	(b)	Description				
OF EXPENDITURE		Salaries/W	ages/Contract Labo	or			<b>느</b>		de of Texas. Com		Г.
							Campaign Sta		officeholder living	expense	
							Campaign 30	an .	Jaianes		
Complete <u>ONLY</u> it expenditure to be			ficeholder name	Of	ffice sou	ght			Office he	eld	
Date		Payee name	<u> </u>								
08/30/2024		Cavanagh									
				Ctata	Zin Co	do					
Amount (\$)	E 40 00	Payee addre		State;	Zip Co	ue					
\$2,	548.98		op 1604 West								
Expenditure from		Ste 108-23									
corporate funds		San Anton	io, TX 78248								
PURPOSE		(a) Category (	See Categories listed at the to	op of this sched	dule)	(b)	Description				
OF EXPENDITURE		Salaries/W	ages/Contract Labo	or			<b>—</b>		de of Texas. Com		Г.
LXI LINDITORE									officeholder living	expense	
							Campaign Sta	ait S	Saiaries		
Complete <u>ONLY</u> it expenditure to be			ficeholder name	Of	ffice sou	ght			Office he	eld	
expenditure to bei	TOTAL C/OF	1									

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/36 Rpt: 14/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
09/13/2024	Cavanagh, Brendan
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,548.98	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Campaign Staff Salaries
	Campaign Stan Salanes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
07/10/2024	City of Austin
Amount (\$)	Payee address; City; State; Zip Code
\$7.75	P.O. Box 1088
ψ1.110	1 101 BOX 1000
Expenditure from corporate funds	Austin, TX 78767
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	Expense Check if Austin, TX, officeholder living expense  Travel
	Travei
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
08/26/2024	City of Cedar Park
Amount (\$)	Payee address; City; State; Zip Code
\$420.00	450 Cypress Creek Road
Expenditure from	
corporate funds	Cedar Park, TX 78613
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Event Space Rental
Operation Children	On didn't lotter had a many
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
21.12.11.21.12.12.12.12.12.12.12.12.12.1	

## SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/36 Rpt: 15/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
09/04/2024	Costco
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$162.36	999 Lake Drive
— Foresedit ve from	
Expenditure from corporate funds	Issaquah, WA 98027
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Office Supplies
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-
Date	Payee name
08/30/2024	Dickison, Madison
Amount (\$)	Payee address; City; State; Zip Code
\$1,736.88	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Campaign Staff Salaries
	1,40
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>1</del>
Date	Payee name
09/13/2024	Dickison, Madison
Amount (\$)	Payee address; City; State; Zip Code
\$1,892.53	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense  Campaign Staff Salaries
	Campaigh Stail Salahes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<b>y</b>

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comn Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/36 Rpt: 16/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
07/05/2024	Elias Law Group
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$221.00	250 Massachusetts Avenue NW
	Ste 400
X Expenditure from corporate funds	Washington, DC 20001
Corporate funds	1
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Legal Services
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/21/2024	Fedex
Amount (¢)	Payee address; City; State; Zip Code
Amount (\$)	
\$67.97	942 South Shady Grove Road
Expenditure from corporate funds	Memphis, TN 38120
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	
EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Shipping
	Griipping .
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experialitate to beliefit 6/0	
Date	Payee name
08/21/2024	Fedex
Amount (\$)	Payee address; City; State; Zip Code
\$68.88	942 South Shady Grove Road
Expenditure from corporate funds	Memphis, TN 38120
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
	Chicaing
	Shipping
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/36 Rpt: 17/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
08/21/2024	Fedex
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$69.11	942 South Shady Grove Road
Expenditure from corporate funds	Memphis, TN 38120
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Shipping
	Shipping
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
08/21/2024	Fedex
Amount (\$)	Payee address; City; State; Zip Code
\$70.01	942 South Shady Grove Road
Expenditure from	
corporate funds	Memphis, TN 38120
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Shipping
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
08/21/2024	Fedex
Amount (\$)	Payee address; City; State; Zip Code
\$70.01	942 South Shady Grove Road
Expenditure from corporate funds	Memphis, TN 38120
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Solicitation/Fundraising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Shipping
Complete ONLY if alice -	Condidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/36 Rpt: 18/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
08/15/2024	Fulkerson, Samuel
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$794.50	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Campaign Staff Salaries
	Campaign Stail Salaties
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
08/30/2024	Fulkerson, Samuel
Amount (\$)	Payee address; City; State; Zip Code
\$2,051.25	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Campaign Staff Salaries
	Campaign Stail Salaties
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit or or	
Date	Payee name
09/13/2024	Fulkerson, Samuel
Amount (\$)	Payee address; City; State; Zip Code
\$2,051.25	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<b>o</b>

## SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 11/36 Rpt: 19/45	Central Texas Democrats PAC	00088744
4 Date	5 Payee name	·
09/03/2024	Google	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$166.36	1600 Amphitheatre Pkwy	
— Foresaditore from		
Expenditure from corporate funds	Mountain View, CA 94043	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Software Subscription	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Software Subscription
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/OI	1	
Date	Payee name	
07/15/2024	Haecker, Rita	
Amount (\$)	Payee address; City; State; Zip C	ode
\$574.41	1150 N. Loop 1604 West	
	Ste 108-230	
Expenditure from corporate funds	San Antonio, TX 78248	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign Staff Salaries
		Campaign Stan Statics
Complete ONLY if direct	Candidate/Officeholder name Office so	L ught Office held
expenditure to benefit C/OI	1	
Date	Payee name	
07/31/2024	Haecker, Rita	
Amount (\$)	Payee address; City; State; Zip C	ode
\$288.82	1150 N. Loop 1604 West	
	Ste 108-230	
Expenditure from corporate funds	San Antonio, TX 78248	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign Staff Salaries
		Sampaign Stain Salaties
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/OI		

## SCHEDULE F1

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

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

1

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense
Salaries/Wages/Contract Labor

Candidate/Officeriolaet/i offical Con		minitee Legal Services Sala	iles/wages/contract Labor		OTTLIN (CINCI a	category not listed above)
Credit Card Payment		The Instruction Guide explains how t	o complete this form.			
Total pages Schedule F1:	2	FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 12/36 Rpt: 20/45		Central Texas Democrats PAC			00088744	
Date	5	Payee name				
07/15/2024	l	Hornandoz Ponny				

4 Date	5 Payee name	
07/15/2024	Hernandez, Benny	
6 Amount (\$) \$1,296.51  Expenditure from corporate funds  8 PURPOSE	7 Payee address; City; State; Zip Co 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248  (a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Staff Salaries
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght Office held
Date	Payee name	
07/31/2024	Hinojosa, Cynthia	
Amount (\$) \$2,175.81  Expenditure from corporate funds	Payee address; City; State; Zip Co 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248	ode
PURPOSE		(h) Description
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign Staff Salaries
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght Office held
Date 08/15/2024	Payee name Hinojosa, Cynthia	
Amount (\$) \$721.83	Payee address; City; State; Zip Co 1150 N. Loop 1604 West	ode
Expenditure from corporate funds	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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Staff Salaries
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght Office held
I		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 13/36 Rpt: 21/45	Central Texas Democrats PAC  00088744
4 Date	5 Payee name
08/30/2024	Hinojosa, Cynthia
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$721.83	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
9 Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/13/2024	Hinojosa, Cynthia
Amount (\$)	Payee address; City; State; Zip Code
\$721.83	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/13/2024	Ibarra, Lesly
Amount (\$)	Payee address; City; State; Zip Code
\$1,892.53	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
LXI LINDITORE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 14/36 Rpt: 22/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
07/15/2024	Johnson, Joseph
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,918.15	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
	Campaign Clair Caraine
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff of of	'
Date	Payee name
07/31/2024	Johnson, Joseph
Amount (\$)	Payee address; City; State; Zip Code
\$1,926.70	1150 N. Loop 1604 West
, -, · · ·	Ste 108-230
Expenditure from	
corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/15/2024	Johnson, Joseph
Amount (\$)	Payee address; City; State; Zip Code
\$1,788.03	1150 N. Loop 1604 West
Ψ1,700.03	·
Expenditure from	Ste 108-230
corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

The Instruction Guide explains how to complete this form.  1 Total pages Schedule F1: Sch: 15/36 Rpt: 23/45	rs)
Sch: 15/36 Rpt: 23/45         Central Texas Democrats PAC         00088744           4 Date 08/30/2024         5 Payee name Johnson, Joseph	rs)
4 Date 5 Payee name Johnson, Joseph	
08/30/2024 Johnson, Joseph	
6 Amount (\$) 7 Payae address: City: State: 7in Code	
ρ <b>υ</b> Απουπείτην την Γεργασία αυτίσους το City, ευτίατος Δίμου City	
\$1,788.03 1150 N. Loop 1604 West	
Ste 108-230	
Expenditure from	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule)  OF Calculation NA area of Complete Schedule T	
Salaries/Wages/Contract Labor  EXPENDITURE  Salaries/Wages/Contract Labor    Check if travel outside of Texas. Complete Schedule T.	
Campaign Staff Salaries	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
Data Davis and	
Date Payee name	
09/13/2024 Johnson, Joseph	
Amount (\$) Payee address; City; State; Zip Code	
\$1,788.03 1150 N. Loop 1604 West	
Ste 108-230	
Expenditure from corporate funds San Antonio, TX 78248	
PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.	
Check if Austin, 1X, officenoider living expense	
Campaign Staff Salaries	
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
expenditure to benefit G/OTT	
Date Payee name	
08/29/2024 Longhorn Organizing Strategies	
Amount (\$) Payee address; City; State; Zip Code	
\$175,000.00 3120 Southwest Fwy	
Ste 101 PMB 693824	
Expenditure from	
PURPOSE  (a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Texas Complete Schedule Texas Complete Schedule Texas Complete Schedule Texas Complete Schedule Texas	
Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
Field Consulting	
	ĺ
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	

## SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 16/36 Rpt: 24/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
07/24/2024	Lyft
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10.80	568 Brannan St
Expenditure from corporate funds	San Francisco, CA 94107
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Transportation Equipment And Related    Check if travel outside of Texas. Complete Schedule T.
	Expense
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
07/24/2024	Lyft
Amount (\$)	Payee address; City; State; Zip Code
\$11.86	568 Brannan St
·	
Expenditure from corporate funds	San Francisco, CA 94107
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Transportation Equipment And Related  Fxpense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Expense
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
07/24/2024	Lyft
	•
Amount (\$) \$15.54	Payee address; City; State; Zip Code 568 Brannan St
Φ10.54	JUO DIAIIIAII SI
Expenditure from corporate funds	San Francisco, CA 94107
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related
LAI LINDITURE	Expense Check if Austin, TX, officeholder living expense
	Travel
Complete ONLY if direct	Condidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 17/36 Rpt: 25/45	Central Texas Democrats PAC  00088744
4 Date	5 Payee name
07/24/2024	Lyft
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15.57	568 Brannan St
Expenditure from corporate funds	San Francisco, CA 94107
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
	Travel
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/25/2024	Lyft
Amount (\$)	Payee address; City; State; Zip Code
\$9.70	568 Brannan St
Ψ3.10	ood Brainfair of
Expenditure from corporate funds	San Francisco, CA 94107
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related
_/	Expense Check if Austin, TX, officeholder living expense
	Travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
07/25/2024	Lyft
Amount (\$)	Payee address; City; State; Zip Code
\$12.99	568 Brannan St
Ψ12.55	ood Brainfair of
Expenditure from corporate funds	San Francisco, CA 94107
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related
EXPENDITORE	Expense
	Travel
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

## SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 18/36 Rpt: 26/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
07/26/2024	Lyft
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$12.10	568 Brannan St
- "	
Expenditure from corporate funds	San Francisco, CA 94107
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	Expense
	Travel
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiditure to beliefit C/Oi	
Date	Payee name
07/26/2024	Lyft
Amount (\$)	Payee address; City; State; Zip Code
\$13.94	568 Brannan St
Ψ10.54	330 Brainfail of
Expenditure from	
corporate funds	San Francisco, CA 94107
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	Expense
	Travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oi	
Date	Payee name
07/26/2024	Lyft
Amount (\$)	Payee address; City; State; Zip Code
\$13.99	568 Brannan St
Ψ±3.33	555 Brainfair Ot
Expenditure from	
corporate funds	San Francisco, CA 94107
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	Expense Check if Austin, TX, officeholder living expense
	Travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiorare to benefit C/OI	·

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	<u> </u>
Sch: 19/36 Rpt: 27/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
07/29/2024	Lyft
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5.00	568 Brannan St
Expenditure from corporate funds	San Francisco, CA 94107
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.  Expense Check if Austin, TX, officeholder living expense
	Expense
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
07/29/2024	Lyft
Amount (\$)	Payee address; City; State; Zip Code
\$18.00	568 Brannan St
— Forestitus from	
Expenditure from corporate funds	San Francisco, CA 94107
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Expense Check if Austin, TX, officeholder living expense
	Travel
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
08/05/2024	Lyft
Amount (\$)	Payee address; City; State; Zip Code
\$5.00	568 Brannan St
,	
Expenditure from corporate funds	San Francisco, CA 94107
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
	Travel
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>1</del>

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 20/36 Rpt: 28/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
07/30/2024	MBA Consulting Group
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	611 Pennsylvania Ave SE
	# 143
X Expenditure from corporate funds	Washington, DC 20003
	1
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Compliance Services
	Compilative Services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/04/2024	MBA Consulting Group
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	611 Pennsylvania Ave SE
Ψ2,300.00	
Expenditure from	# 143
corporate funds	Washington, DC 20003
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Consulting Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Compliance Services
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/06/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$114.68	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

## SCHEDULE F1

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

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

Credit Card Payment	The Instruction Guide explains how to comp	plete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 21/36 Rpt: 29/45	Central Texas Democrats PAC	00088744
4 Date	5 Payee name	
08/09/2024	Office Depot	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$127.19	6600 N Military Trl	
Expenditure from		
corporate funds	Boca Raton, FL 33487	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	D) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office Supplies
		Office Supplies
9 Complete ONLY if direct	Candidate/Officeholder name Office sough	office held
expenditure to benefit C/OI		i. Since field
Date	Payee name	
08/14/2024	Office Depot	
Amount (\$)	Payee address; City; State; Zip Code	
\$62.87	6600 N Military Trl	<del>;</del>
φυ2.07	0000 N Willitary 111	
Expenditure from corporate funds	Boca Raton, FL 33487	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	Description
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sough	ot Office held
expenditure to benefit C/OI	٠	
Date	Payee name	
08/14/2024	Office Depot	
Amount (\$)	Payee address; City; State; Zip Code	
\$388.48	6600 N Military Trl	
	,	
Expenditure from corporate funds	Boca Raton, FL 33487	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	D) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
LXI LIBITORE		Check if Austin, TX, officeholder living expense
		Office Supplies
Commission ONII V if dispose	Condidate/Officeholder serve	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	office held
•		

## SCHEDULE F1

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

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

Credit Card Payment	The Instruction Guide explains how to co	omplete	e this form.	,
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission	on Filers)
Sch: 22/36 Rpt: 30/45	Central Texas Democrats PAC		00088744	
4 Date	5 Payee name			
08/16/2024	Office Depot			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$39.29	6600 N Military Trl			
Expenditure from corporate funds	Boca Raton, FL 33487			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) [	Description	
OF EXPENDITURE	Office Overhead/Rental Expense	[	Check if travel outside of Texas. Complete Schedule T.	
-		L	Check if Austin, TX, officeholder living expense Office Supplies	
		`	Office Supplies	
9 Complete ONLY if direct	Candidate/Officeholder name Office so	<u> </u> uaht	Office held	
expenditure to benefit C/O		agrit	Office Held	
Date	Dove name			
08/22/2024	Payee name Office Depot			
	·	, odo		
Amount (\$) \$54.11		oue		
Φ34.11	6600 N Military Trl			
Expenditure from corporate funds	Boca Raton, FL 33487			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) [	Description	
OF EXPENDITURE	Office Overhead/Rental Expense	[	Check if travel outside of Texas. Complete Schedule T.	
		L	Check if Austin, TX, officeholder living expense Office Supplies	
			Office Supplies	
Complete ONLY if direct	Candidate/Officeholder name Office so	<u> </u> uaht	Office held	
expenditure to benefit C/O		ug	0.000 0.00	
Date	Payee name			
08/30/2024	Office Depot			
Amount (\$)	Payee address; City; State; Zip Ci	oho.		
\$60.35	6600 N Military Trl	oue		
Ψ00.03	3333 William Y Fil			
Expenditure from corporate funds	Boca Raton, FL 33487			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) [	Description	
OF EXPENDITURE	Office Overhead/Rental Expense	[	Check if travel outside of Texas. Complete Schedule T.	
			Check if Austin, TX, officeholder living expense Office Supplies	
			Cinco Supplies	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	<u>l</u> uaht	Office held	
expenditure to benefit C/O		-agiit	Since hold	

## SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 23/36 Rpt: 31/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
08/30/2024	Office Depot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$71.06	6600 N Military Trl
Evpanditura from	
Expenditure from corporate funds	Boca Raton, FL 33487
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Office Supplies
	Οπισε σαμβιίος
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
08/30/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$113.64	6600 N Military Trl
72200	
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>1</del>
Date	Payee name
09/05/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$124.72	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Office Supplies
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

## SCHEDULE F1

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

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 24/36 Rpt: 32/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
09/09/2024	Office Depot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$181.63	6600 N Military Trl
— Forest diture from	
Expenditure from corporate funds	Boca Raton, FL 33487
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Office Supplies
	Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belief of or	•
Date	Payee name
09/09/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$44.20	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
09/13/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$73.61	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

## SCHEDULE F1

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

Fees
Fees
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outer a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 25/36 Rpt: 33/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
09/16/2024	Office Depot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$82.25	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Office Supplies
	Οπίου σαμβίουσ
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
5.	
Date	Payee name
09/17/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$49.66	6600 N Military Trl
Evanditure from	
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Office Supplies
2 1 2 2 1 1 2 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
09/17/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$38.43	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
3.,50	

## SCHEDULE F1

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

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:		-
Sch: 26/36 Rpt: 34/45	Central Texas Democrats PAC 00088744	
4 Date	5 Payee name	
09/18/2024	Office Depot	
6 Amount (\$)	7 Payee address; City; State; Zip Code	╛
\$47.58	6600 N Military Trl	
Expenditure from corporate funds	Boca Raton, FL 33487	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Office Supplies	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
Date	Payee name	=
09/19/2024	Office Depot	
Amount (\$)	Payee address; City; State; Zip Code	_
\$19.17	6600 N Military Trl	
Ψ±3.±1	6000 N Military 111	
Expenditure from corporate funds	Boca Raton, FL 33487	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Office Supplies	
	Сос Саррсс	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	•	
Date	Dove nome	=
09/19/2024	Payee name Office Depot	
	·	_
Amount (\$)	Payee address; City; State; Zip Code	
\$162.38	6600 N Military Trl	
Expenditure from corporate funds	Boca Raton, FL 33487	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Office Supplies	
Commission ONII V if dispose	Constitute / Office helder name Office accords	_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
		_

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 27/36 Rpt: 35/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
09/19/2024	Office Depot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$70.12	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Office Supplies
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-
Date	Payee name
09/19/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$6.17	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Office Supplies
	Office Supplies
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Daves name
09/23/2024	Payee name Office Depot
	·
Amount (\$)	Payee address; City; State; Zip Code
\$22.72	6600 N Military Trl
Expenditure from	
corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
LAI LINDITORE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to beliefft G/OI	•

## SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenolder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 28/36 Rpt: 36/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
09/23/2024	Office Depot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$42.06	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Office Supplies
	Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
oxportantaro to sorione or o	
Date	Payee name
09/24/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$169.84	6600 N Military Trl
,	
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to belieff Great	
Date	Payee name
09/25/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$201.75	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

## SCHEDULE F1

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

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

Credit Card Payment	The Instruction Guide explains how to	comple	ete this form.
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 29/36 Rpt: 37/45	Central Texas Democrats PAC		00088744
4 Date	5 Payee name		
09/26/2024	Office Depot		
6 Amount (\$)	7 Payee address; City; State; Zip	Code	
\$162.38	6600 N Military Trl		
Expenditure from corporate funds	Boca Raton, FL 33487		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Office Overhead/Rental Expense	( )	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	·		Check if Austin, TX, officeholder living expense
			Office Supplies
O Commission ONLL V if divers	Condidate/Officeledder reces		Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		sought	Office held
Date	Payee name		
07/15/2024	Payroll Data Processing		
Amount (\$)	Payee address; City; State; Zip	Code	
\$79.23	4224 Henderson Blvd		
Expenditure from			
corporate funds	Tampa, FL 33629		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Payroll Fee
			•
Complete ONLY if direct	Candidate/Officeholder name Office	sought	Office held
expenditure to benefit C/O	Н		
Date	Payee name		
07/31/2024	Payroll Data Processing		
Amount (\$)	Payee address; City; State; Zip	Code	
\$79.23	4224 Henderson Blvd		
Expenditure from corporate funds	Tampa, FL 33629		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(h)	Description
OF	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Calaires, Trages, Constact Lass.		Check if Austin, TX, officeholder living expense
			Payroll Fee
Complete <u>ONLY</u> if direct expenditure to benefit C/O		sought	Office held
SAPERIALE TO BEHEIL O/O			

## SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 30/36 Rpt: 38/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
08/14/2024	Payroll Data Processing
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$73.73	4224 Henderson Blvd
- Funanditura from	
Expenditure from corporate funds	Tampa, FL 33629
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense Payroll Fee
	rayioli ree
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	David and the second se
Date	Payee name
08/29/2024	Payroll Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$61.48	4224 Henderson Blvd
Expenditure from	
corporate funds	Tampa, FL 33629
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
<u> </u>	
Date	Payee name
09/12/2024	Payroll Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$79.23	4224 Henderson Blvd
Expenditure from	
corporate funds	Tampa, FL 33629
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense
	Payroll Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

## SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services  The Instruction Guide explains	Salaries/Wages/Contract Labor s how to complete this form.	OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 31/36 Rpt: 39/45	Central Texas Democrats PAC		00088744
4 Date	5 Payee name		
07/15/2024	Payroll Data Processing		
6 Amount (\$)	7 Payee address; City; State	e; Zip Code	
\$3,899.18	4224 Henderson Blvd		
Expenditure from corporate funds	Tampa, FL 33629		
8 PURPOSE	(a) Category (See Categories listed at the top of this so	hedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel	outside of Texas. Complete Schedule T.
EXPENDITORE		ı —	n, TX, officeholder living expense
		Payroll Taxe	S
9 Complete ONLY if direct		Office sought	Office held
expenditure to benefit C/OI	1		
Date	Payee name		
07/31/2024	Payroll Data Processing		
Amount (\$)	Payee address; City; State	e; Zip Code	
\$3,964.27	4224 Henderson Blvd		
Expenditure from corporate funds	Tampa, FL 33629		
PURPOSE		hedule) (b) Description	
OF	(a) Category (See Categories listed at the top of this so Salaries/Wages/Contract Labor	′ I — '	outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor	Check if Austin	n, TX, officeholder living expense
		Payroll Taxe	s
Complete ONLY if direct		Office sought	Office held
expenditure to benefit C/OI	1		
Date	Payee name		
08/14/2024	Payroll Data Processing		
Amount (\$)	Payee address; City; State	e; Zip Code	
\$2,987.87	4224 Henderson Blvd	•	
Expenditure from corporate funds	Tampa, FL 33629		
PURPOSE		(b) December	
OF	(a) Category (See Categories listed at the top of this so		outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor		n, TX, officeholder living expense
		Payroll Taxe	
Complete ONLY if direct	Candidate/Officeholder name	Office sought	Office held
expenditure to benefit C/OI	4		

## SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 32/36 Rpt: 40/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
08/29/2024	Payroll Data Processing
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$4,195.22	4224 Henderson Blvd
Expenditure from corporate funds	Tampa, FL 33629
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
	T dyron races
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
09/12/2024	Payroll Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$4,439.01	4224 Henderson Blvd
Expenditure from corporate funds	Tampa, FL 33629
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
07/26/2024	Poke Fresh
Amount (\$)	Payee address; City; State; Zip Code
\$47.36	507 Dallas St
¥ 11.00	
Expenditure from corporate funds	Houston, TX 77002
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Meals
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<b>1</b>

## SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 33/36 Rpt: 41/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
07/24/2024	Soy Pinoy
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$22.72	401 Franklin St
	Ste 1230
Expenditure from corporate funds	Houston, TX 77201
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Meals
	Medis
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
07/15/2024	Stewart, Katherine
Amount (\$)	Payee address; City; State; Zip Code
\$2,918.15	1150 N. Loop 1604 West
·	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Campaign Staff Salaries
	Campaign Stan Salanes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
07/31/2024	Stewart, Katherine
Amount (\$)	Payee address; City; State; Zip Code
\$1,926.70	1150 N. Loop 1604 West
Ψ1,320.70	Ste 108-230
Expenditure from	
corporate funds	San Antonio, TX 78248
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>1</del>

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 34/36 Rpt: 42/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
08/15/2024	Stewart, Katherine
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,788.03	1150 N. Loop 1604 West
Expenditure from	Ste 108-230
corporate funds	San Antonio, TX 78248
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Campaign Staff Salaries
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
08/30/2024	Stewart, Katherine
Amount (\$)	Payee address; City; State; Zip Code
\$1,788.03	1150 N. Loop 1604 West
- Evanaditura from	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Campaign Staff Salaries
	Campaign clair calaites
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialiture to benefit C/OI	
Date	Payee name
09/13/2024	Stewart, Katherine
Amount (\$)	Payee address; City; State; Zip Code
\$87.73	1150 N. Loop 1604 West
Expenditure from	Ste 108-230
corporate funds	San Antonio, TX 78248
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	Campaign Staff Salaries
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>1</del>

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula F1:	
1 Total pages Schedule F1:	
Sch: 35/36 Rpt: 43/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
09/10/2024	Sweet Green
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$85.88	3101 W Exposition Blvd
Expenditure from	Los Aprelos CA 00010
corporate funds	Los Angeles, CA 90018
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Meals
	Medis
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/61	'
Date	Payee name
09/20/2024	The Railhouse Bar
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	107 E Center St
<b>4100.00</b>	101 L Gallian St
Expenditure from	// L = 7/ = 20 / 2
corporate funds	Kyle, TX 78640
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense
	Check if Austin, TX, officeholder living expense
	Event Space Rental
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/61	'
Date	Payee name
09/20/2024	The Railhouse Bar
Amount (\$)	Payee address; City; State; Zip Code
\$124.00	107 E Center St
Ψ127.00	25. 2 55.10. 50
Expenditure from	V 1 TV 70040
corporate funds	Kyle, TX 78640
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense
	Check if Austin, TX, officeholder living expense
	Event Space Rental
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

## SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 36/36 Rpt: 44/45	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
08/21/2024	YourMembership
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$99.00	9620 Executive Center Dr N
	Ste 200
Expenditure from corporate funds	St Petersburg, FL 33702
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Software Subscription
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Software Subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 45/45 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Central Texas Democrats PAC 00088744 5 Name of person from whom amount is received Date 8 Amount (\$) 09/03/2024 \$420.00 City of Cedar Park 6 Address of person from whom amount is received; City; State; Zip Code Cedar Park, TX 78613 Purpose for which amount is received Check if political contribution returned to filer Refund from Vendor