

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00081055	2 Total pages filed: 17	
3 COMMITTEE NAME Turn Texas Blue PAC			OFFICE USE ONLY	
			Date Received ELECTRONICALLY FILED 10/06/2024	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address			ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1006 Banister Ln. Bldg 10, Apt. 1001 Austin, TX 78704	
5 CAMPAIGN TREASURER NAME			MS / MRS / MR FIRST MI Mr. Steven NICKNAME LAST SUFFIX Rivas	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)			STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1006 Banister Ln. Bldg. 10, Apt. 1001 Austin, TX 78704	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address			STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1006 Banister Ln. Bldg. 10, Apt. 1001 Austin, TX 78704	
8 CAMPAIGN TREASURER PHONE			AREA CODE PHONE NUMBER EXTENSION (210) 310-4224	
9 REPORT TYPE			<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff	
10 PERIOD COVERED			Month Day Year 07/01/2024 THROUGH Month Day Year 09/26/2024	
11 ELECTION			ELECTION DATE Month Day Year 11/05/2024 ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Turn Texas Blue PAC	13 Filer ID (Ethics Commission Filers) 00081055
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 728.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 809.69
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 164.22
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Steven Rivas

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
3 of 17

17 COMMITTEE NAME Turn Texas Blue PAC		18 Filer ID (Ethics Commission Filers) 00081055
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 728.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 809.69
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/8 Rpt: 4/17
2 FILER NAME Turn Texas Blue PAC		3 Filer ID (Ethics Commission Filers) 00081055
4 Date 07/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SHANNON <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78717	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, SHANNON <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78717	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYERS, ROBERT <hr/> Contributor address; City; State; Zip Code WILLOW PARK, TX 76097	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CITY OF FORT WORTH		Employer (See Instructions) CITY OF FORT WORTH
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYERS, ROBERT <hr/> Contributor address; City; State; Zip Code WILLOW PARK, TX 76097	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CITY OF FORT WORTH		Employer (See Instructions) CITY OF FORT WORTH
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BYERS, ROBERT <hr/> Contributor address; City; State; Zip Code WILLOW PARK, TX 76097	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CITY OF FORT WORTH		Employer (See Instructions) CITY OF FORT WORTH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/8 Rpt: 5/17
2 FILER NAME Turn Texas Blue PAC		3 Filer ID (Ethics Commission Filers) 00081055
4 Date 09/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FEIRRELL, TODD <hr/> 6 Contributor address; City; State; Zip Code PADUCAH, KY 42003	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 07/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GIFFORD, BARBARA <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20906	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) RETIRED		Employer (See Instructions) RETIRED
Date 07/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUIDI, CLAUDIA <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20910	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DOL		Employer (See Instructions) DOL
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUIDI, CLAUDIA <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20910	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DOL		Employer (See Instructions) DOL
Date 09/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUIDI, CLAUDIA <hr/> Contributor address; City; State; Zip Code SILVER SPRING, MD 20910	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) DOL		Employer (See Instructions) DOL

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/8 Rpt: 6/17
2 FILER NAME Turn Texas Blue PAC		3 Filer ID (Ethics Commission Filers) 00081055
4 Date 07/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHTOWER, EDWIN 6 Contributor address; City; State; Zip Code DALLAS, TX 75254	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) CALIBER		9 Employer (See Instructions) CALIBER
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHTOWER, EDWIN Contributor address; City; State; Zip Code DALLAS, TX 75254	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CALIBER		Employer (See Instructions) CALIBER
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HIGHTOWER, EDWIN Contributor address; City; State; Zip Code DALLAS, TX 75254	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) CALIBER		Employer (See Instructions) CALIBER
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEYN, WILLIAM Contributor address; City; State; Zip Code ALAMEDA, CA 94502	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) GOVERNMENT		Employer (See Instructions) GOVERNMENT
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESTER, PATRICK Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/8 Rpt: 7/17
2 FILER NAME Turn Texas Blue PAC		3 Filer ID (Ethics Commission Filers) 00081055
4 Date 08/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESTER, PATRICK <hr/> 6 Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NESTER, PATRICK <hr/> Contributor address; City; State; Zip Code DRIFTWOOD, TX 78619	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 07/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANOS, PATRICK <hr/> Contributor address; City; State; Zip Code SANDY, UT 84094	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) UNIVERSITY OF UTAH		Employer (See Instructions) UNIVERSITY OF UTAH
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANOS, PATRICK <hr/> Contributor address; City; State; Zip Code SANDY, UT 84094	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) UNIVERSITY OF UTAH		Employer (See Instructions) UNIVERSITY OF UTAH
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PANOS, PATRICK <hr/> Contributor address; City; State; Zip Code SANDY, UT 84094	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) UNIVERSITY OF UTAH		Employer (See Instructions) UNIVERSITY OF UTAH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/8 Rpt: 8/17
2 FILER NAME Turn Texas Blue PAC		3 Filer ID (Ethics Commission Filers) 00081055
4 Date 07/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY <hr/> 6 Contributor address; City; State; Zip Code LIGONIER, PA 15658	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY <hr/> Contributor address; City; State; Zip Code LIGONIER, PA 15658	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 09/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAIZMAN, DOROTHY <hr/> Contributor address; City; State; Zip Code LIGONIER, PA 15658	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 07/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELLS, GREG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78741	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INTERNAL REVENUE SERVICE		Employer (See Instructions) INTERNAL REVENUE SERVICE
Date 08/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELLS, GREG <hr/> Contributor address; City; State; Zip Code AUSTIN, TX 78741	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) INTERNAL REVENUE SERVICE		Employer (See Instructions) INTERNAL REVENUE SERVICE

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/8 Rpt: 9/17
2 FILER NAME Turn Texas Blue PAC		3 Filer ID (Ethics Commission Filers) 00081055
4 Date 09/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SELLS, GREG <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78741	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) INTERNAL REVENUE SERVICE		9 Employer (See Instructions) INTERNAL REVENUE SERVICE
Date 07/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINKER, KEVIN <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) USCIS		Employer (See Instructions) USCIS
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINKER, KEVIN <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) USCIS		Employer (See Instructions) USCIS
Date 09/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TINKER, KEVIN <hr/> Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75052	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) USCIS		Employer (See Instructions) USCIS
Date 07/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, PATTI <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/8 Rpt: 10/17
2 FILER NAME Turn Texas Blue PAC		3 Filer ID (Ethics Commission Filers) 00081055
4 Date 08/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, PATTI <hr/> 6 Contributor address; City; State; Zip Code DENTON, TX 76207	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WATTS, PATTI <hr/> Contributor address; City; State; Zip Code DENTON, TX 76207	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 07/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIL, JESSE L <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40517	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIL, JESSE L <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40517	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WEIL, JESSE L <hr/> Contributor address; City; State; Zip Code LEXINGTON, KY 40517	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) NOT EMPLOYED		Employer (See Instructions) NOT EMPLOYED

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/8 Rpt: 11/17
2 FILER NAME Turn Texas Blue PAC		3 Filer ID (Ethics Commission Filers) 00081055
4 Date 08/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTERLUND, TRINA <hr/> 6 Contributor address; City; State; Zip Code BELLEVUE, WA 98004	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) NOT EMPLOYED		9 Employer (See Instructions) NOT EMPLOYED

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/6 Rpt: 12/17	2 FILER NAME Turn Texas Blue PAC	3 Filer ID (Ethics Commission Filers) 00081055
4 Date 07/08/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 1600 San Antonio, TX 78296	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fee(s)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/15/2024	Candidate/Officeholder name Office sought Office held	
Payee name Frost Bank		
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 1600 San Antonio, TX 78296	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fee(s)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/22/2024	Candidate/Officeholder name Office sought Office held	
Payee name Frost Bank		
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 1600 San Antonio, TX 78296	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fee(s)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/6 Rpt: 13/17	2 FILER NAME Turn Texas Blue PAC	3 Filer ID (Ethics Commission Filers) 00081055
4 Date 08/05/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 1600 San Antonio, TX 78296	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fee(s)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/12/2024	Candidate/Officeholder name Office sought Office held	
Payee name Frost Bank		
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 1600 San Antonio, TX 78296	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fee(s)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/19/2024	Candidate/Officeholder name Office sought Office held	
Payee name Frost Bank		
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 1600 San Antonio, TX 78296	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fee(s)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/6 Rpt: 14/17	2 FILER NAME Turn Texas Blue PAC	3 Filer ID (Ethics Commission Filers) 00081055
4 Date 08/26/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 1600 San Antonio, TX 78296	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fee(s)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/03/2024	Candidate/Officeholder name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. Box 1600 San Antonio, TX 78296	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fee(s)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2024	Candidate/Officeholder name Frost Bank	
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O. Box 1600 San Antonio, TX 78296	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fee(s)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/6 Rpt: 15/17	2 FILER NAME Turn Texas Blue PAC	3 Filer ID (Ethics Commission Filers) 00081055
4 Date 09/16/2024	5 Payee name Frost Bank	
6 Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 1600 San Antonio, TX 78296	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fee(s)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/23/2024	Candidate/Officeholder name Office sought Office held	
Payee name Frost Bank		
Amount (\$) \$15.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 1600 San Antonio, TX 78296	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking Fee(s)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/01/2024	Candidate/Officeholder name Office sought Office held	
Payee name MailChimp		
Amount (\$) \$117.26 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 675 Ponce De Leon Avenue Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Web Service(s)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/6 Rpt: 16/17	2 FILER NAME Turn Texas Blue PAC	3 Filer ID (Ethics Commission Filers) 00081055
4 Date 07/22/2024	5 Payee name MailChimp	
6 Amount (\$) \$117.26 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 675 Ponce De Leon Avenue Suite 5000 Atlanta, GA 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Web Service(s)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name MailChimp		
Amount (\$) \$117.26 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 675 Ponce De Leon Avenue Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Web Service(s)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2024	Candidate/Officeholder name Office sought Office held	
Payee name The Rivas Group		
Amount (\$) \$95.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1006 Banister Ln Apt 1001 Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting and Compliance Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 17/17	2 FILER NAME Turn Texas Blue PAC	3 Filer ID (Ethics Commission Filers) 00081055
4 Date 07/15/2024	5 Payee name Zoom	
6 Amount (\$) \$197.91 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 55 Almaden Blvd., 6th Floor San Jose, CA 95113	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital Web Service(s)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held