FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00068900 3 COMMITTEE NAME **OFFICE USE ONLY** Women Organizing Women Democrats Date Received **ELECTRONICALLY FILED** 10/06/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 864242 Change of Address Plano, TX 75086-4242 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Mr. David M. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Smith CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER 101 E. Park Blvd., Ste. 600 STREET **ADDRESS** (Residence or Business) Plano, TX 75074 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 101 E. Park Blvd., Ste. 600 MAILING **ADDRESS** Change of Address Plano, TX 75074 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (972) 516-3849 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 X October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 08/26/2024 09/25/2024

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Women Organizing Women Democrats			00068900	
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		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M x check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	181.01
CONTRIBUTION BALANCE	1	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		10,399.14
OUTSTANDING LOAN TOTALS	1	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 pe true and correct and includes all infor under Title 15, Election Code.	rjury, that the ac mation required	companying report is to be reported by me
	Mr. David M. Smith			
		Signature of Ca	mpaign Treasure	er
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ed before me, by the said	, ti	nis 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 office	er administering oath
2.9			5. 560	

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

			3 of 5
17 COMMITTE Women O	EE NAME Organizing Women Democrats	18 Filer ID 00068900	(Ethics Commission Filers)
19 SCHEDULI NAME OF	SUBTOTAL AMOUNT		
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$
7.	7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR O	\$	
9.	SCHEDULE E: LOANS		\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			\$ 181.01
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			\$
12.	12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS		
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			\$
14. X	14. X SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$ 50.00
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$
			,

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries Wagnes/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (other a cottographed 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: 1/1 Rpt: 4/5	Women Organizing Women Democrats 00068900				
4 Date	5 Payee name				
09/08/2024	Constant Contact				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$81.01	1601 Trapelo Road				
Expenditure from corporate funds	Waltham, MA 02451				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Advertising Expense				
	Check if Austin, TX, officeholder living expense electronic newsletter services				
	electionic newsletter services				
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
09/20/2024	Frisco Democrats Political Action Committee				
Amount (\$)	Payee address; City; State; Zip Code				
\$100.00	10216 Joy Drive				
Expenditure from corporate funds	Frisco, TX 75035				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.				
	Check if Austin, TX, officeholder living expense				
	co-sponsorship of a debate watch party				
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				

NON-POLITIC MADE FROM	SCHEDULE I				
The Instruction Guide explains how to complete this form.					
1 Total pages Schedule I: Sch: 1/1 Rpt: 5/5	FILER NAME Women Organizing Women Democrats	3 Filer ID (Ethics Commission Filers) 00068900			
4 Date 09/09/2024	5 Payee name Smith, David				
6 Amount (\$) 50.00 Expenditure from corporate funds	7 Payee Address; City; State; Zip 101 E. Park Blvd., Suite 600 Plano, TX 75074				
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b. Accounting/Banking	Description (See instructions regarding type of information required.) campaign finance report preparation			