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) 00083042						2 Total pages filed: 26	
3	COMMITTEE NAME					OFFICE USE ONLY	
	Texas Democratic	Women of Galveston County				Date Received	
						10/07/2024	
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CIT	'Y;	STATE; ZIP	CODE		
	ADDITESS	1201 Newport Blvd.				Date Hand-delivered or Date Postmarked	
	Change of Address						
		League City, TX 77573				Receipt # Amount	
						Date Processed	
						Date Imaged	
5	CAMPAIGN	MS/MRS/MR FIRST				MI	
	TREASURER NAME	Lauri					
	NAME						
		NICKNAME LAST				SUFFIX	
		Dibrell					
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE	
ľ	TREASURER	3010 Secret Lagoon Ln			,	,	
	STREET ADDRESS						
	(Residence or Business)	Texas City, TX 77568					
7	CAMPAIGN	STREET OR PO BOX;		APT / SUITE #;	CITY	; STATE; ZIP CODE	
ľ	TREASURER			APT/SUITE#,	CITT,	, STATE, ZIP CODE	
	MAILING ADDRESS	3010 Secret Lagoon Ln					
	ADDRE35						
	Change of Address	Texas City, TX 77568					
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXT	ENSION			
	TREASURER PHONE	(409) 599-4515					
	FHONE						
9	REPORT	January 15 X 30)th d	ay before election		Dissolution (Attach PAC-DR)	
	TYPE					10th day after campaign treasurer	
		July 15	nua	y before election		termination	
			unof	1			
10	PERIOD	Month Day Year		Month	Day	Year	
	COVERED	-	HRC		9/26/2024		
11	ELECTION	ELECTION DATE		ELECTION	TYPE		
			Prima	_		Other	
		11/05/2024	Sene	ral Special			
			-0110				
\vdash							
	GO TO PAGE 2						
For	rms provided by Tex	kas Ethics Commission www.et	hic	s.state.tx.us		Version V4.1.0.48da51f7	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texas Democratic Worr	nen of Galveston Count	y	0008304	2
14 COMMITTEE ACTIVITY	1. 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		
	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	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	8,876.44
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	5,806.19
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	3,895.73
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
			Dibrell	
		Signature of Car	mpaign Treas	surer
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, tł	nis the	day
ot	_, 20, to certity v	vhich, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of of	ficer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.48da51f7

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

3 of 26

17 COMMIT	17 COMMITTEE NAME 18 Filer ID (EI						
	emocratic Women of Galveston County	00083042	1				
	ILE SUBTOTALS F SCHEDULE		SUBTOTAL AMOUNT				
			\$ 7,876.44				
1. X	1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS						
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$				
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$				
4. X	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$ 1,000.00				
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION 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 CONTRIBUTIONS	5	\$ 5,806.19				
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 CONTRIBUTIO	ONS	\$				
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$				

SCHEDULE	A1
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The Instruc	ction Guide explains how to complete th	his form.	1	Total pages Schedule A1: Sch: 1/15 Rpt: 4/26	
2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
Texas Demo	pcratic Women of Galveston County			00083042	
4 Date	5 Full name of contributor out-of-state PAC	(ID#:)	7	Amount of Contribution (\$)	
07/29/2024	Antonelli, Jeff				\$1,000.00
	6 Contributor address; City; State; Zip Code				
	galveston, TX 77551				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	าร)		
Owner		Antonelli Travel			
Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
07/11/2024	Apple, Terry				\$20.00
	Contributor address; City; State; Zip Code		"		
	Kemah, TX 77565				
	pation / Job title (See Instructions)	Employer (See Instruction	าร)		
Teacher		Pasadena ISD			
Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
08/30/2024	Apple, Terry				\$20.00
	Contributor address; City; State; Zip Code		"		
	Kemah, TX 77565				
	pation / Job title (See Instructions)	Employer (See Instruction	าร)		
Teacher		Pasadena ISD			
Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	
09/09/2024	Apple, Terry				\$20.00
	Contributor address; City; State; Zip Code				
	Kemah, TX 77565				
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	<u> </u>		
Teacher		Pasadena ISD	15)		
Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)	ቀፍር ርር
08/09/2024	Barnhart, Vicki				\$60.00
	Contributor address; City; State; Zip Code				
	Galveston, TX 77551				
Principal occu	upation / Job title (See Instructions)	Employer (See Instruction	<u> </u> ואי		
Retired		Retired	10)		

The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 2/15 Rpt: 5/26
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ocratic Women of Galveston County		00083042
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
08/07/2024	Bell, Adrienne		\$60.00
	6 Contributor address; City; State; Zip Code		
	Pearland, TX 77588		
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))
Teacher		TCISD	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
08/03/2024	Brakebill, Constance		\$120.00
	Contributor address; City; State; Zip Code		
	Friendswood, TX 77546		
-	upation / Job title (See Instructions)	Employer (See Instructions	
Retired		Retired	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/17/2024	Brandt Boudreaux, Courtney		\$60.00
	Contributor address; City; State; Zip Code		
	League City, TX 77573		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	
None		None	
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
08/20/2024	Brandt Boudreaux, Courtney		\$30.00
00/20/2021	Contributor address; City; State; Zip Code		+00.00
	Continuutor audress, City, State, Zip Code		
	League City, TX 77573		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions) ;)
Project Mana	ager	Albemarle	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/10/2024	Bryan, Susan		\$20.00
	Contributor address; City; State; Zip Code		
	League City, TX 77573		
-	ipation / Job title (See Instructions)	Employer (See Instructions	
Not Employe	эd	Not Employed	

SCHEDULE	A1
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-	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 3/15 Rpt: 6/26	
2 F	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
1	Texas Democratic Women of Galveston County				00083042	
4 C	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
0	07/28/2024	Bryan, Susan				\$120.00
		6 Contributor address; City; State; Zip Code		1		
		League City, TX 77573		Ĺ		
		ipation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Not employe		Not employed	_		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
(08/31/2024	Bryan, Susan				\$20.00
		Contributor address; City; State; Zip Code				
		League City, TX 77573				
┝╴╒	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ג)		
	Not Employe		Not Employed	,		
	Date	Full name of contributor out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	09/08/2024	Bryan, Susan)			\$20.00
	55,05,252.	Contributor address; City; State; Zip Code		\cdot		Ψ20100
		Contributor duress, ony, state, 24 source				
		League City, TX 77573				
	•	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
1	Not Employe	ed	Not Employed			
[Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
(08/06/2024	Burns, Joan				\$60.00
		Contributor address; City; State; Zip Code		1		
┝─┌	Dringing ogg	La Marque, TX 77568 Ipation / Job title (See Instructions)		<u> </u>		
	Site Coordin		Employer (See Instructions Communities in Schools		onnrofit	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀጋርብ በብ
	08/04/2024	Compian, Joe				\$250.00
		Contributor address; City; State; Zip Code				
		La Marque, TX 77568				
F	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	1 5)		
	Councilman		City of LaMarque	,		

SCHEDULE	A1
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			—		
The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/15 Rpt: 7/26	
2 FILER NAME	FILER NAME			Filer ID (Ethics Commission	n Filers)
	cratic Women of Galveston County			00083042	
4 Date	Date 5 Full name of contributor Out-of-state PAC (ID#:)			Amount of Contribution (\$)	
08/13/2024	08/13/2024 Concha, Patricia				\$60.00
	6 Contributor address; City; State; Zip Code		1		
	League City, TX 77573				
	pation / Job title (See Instructions)	9 Employer (See Instructions	3)		
Not Employe	:d	Not Employed			
Date	Full name of contributor out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
07/31/2024	Countiss, Julie				\$100.00
	Contributor address; City; State; Zip Code		1		
	Houston, TX 77019	· · · · ·			
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Justice		State of texas	_		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	—
08/10/2024	Delgado, Maryanne				\$60.00
	Contributor address; City; State; Zip Code				
	League City, TX 77573				
Dringinal occur	pation / Job title (See Instructions)	Employer (See Instructions	$\sum_{i=1}^{n}$		
Not Employe		Not Employed	<i>s)</i>		
			—		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀንደብ በበ
09/06/2024	Denney, Pam				\$250.00
	Contributor address; City; State; Zip Code				
	Clifton, TX 76634				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> 3)		
Self Employe		Self			
Date	Full name of contributor Out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
07/02/2024	Dibrell, Lauri			······································	\$25.00
	Contributor address; City; State; Zip Code		ł		
	Texas City, TX 77568				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>.</u> 5)		
Product Own	ler	ANICO			
		1			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 5/15 Rpt: 8/26
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	ocratic Women of Galveston County		00083042
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
07/13/2024	Dibrell, Lauri		\$25.0
	6 Contributor address; City; State; Zip Code		
	Texas City, TX 77568		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u>لــــــــــــــــــــــــــــــــــــ</u>
Product Owr		ANICO	,
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/21/2024	Dibrell, Lauri		\$60.0
	Contributor address; City; State; Zip Code		
	Texas city, TX 77591		
	pation / Job title (See Instructions)	Employer (See Instructions)
Product Dev	elopment	Anico	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/03/2024	Dibrell, Lauri		\$25.0
	Contributor address; City; State; Zip Code		
	Texas City, TX 77568		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
Product Owr	1er	ANICO	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/01/2024	Dicely, Shannon		\$60.0
	Contributor address; City; State; Zip Code		
	Friendswood, TX 77546		
-	pation / Job title (See Instructions)	Employer (See Instructions)
Student		None	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/11/2024	Erchinger, Caitlin		\$60.0
	Contributor address; City; State; Zip Code		
	League City, TX 77573		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
None		None	

The Instru	ction Guide explains how to complete this f	iorm.	1 Total pages Schedule A1: Sch: 6/15 Rpt: 9/26	
2 FILER NAME			3 Filer ID (Ethics Commission	ו Filers)
	ocratic Women of Galveston County		00083042	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
08/18/2024	Gibson, Tierr'ishia			\$60.00
	6 Contributor address; City; State; Zip Code			
2 Drinsinglago	Texas City, TX 77591		、 、	
	ipation / Job title (See Instructions)	9 Employer (See Instructions)	.)	
None		None		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/05/2024	Gordon, Heidi			\$50.00
	Contributor address; City; State; Zip Code			
	Loogua City TV 77579			
Dringing oog	League City, TX 77573			
Not Employe	ipation / Job title (See Instructions)	Employer (See Instructions) Not Employed	.)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	+=0.00
07/17/2024	Gordon, Heidi			\$50.00
	Contributor address; City; State; Zip Code			
	League City, TX 77573			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)		
Not Employe		Not Employed)	
			Amount of Contribution (f)	
Date 08/05/2024	Full name of contributor out-of-state PAC (ID#:_ Gordon, Heidi)	Amount of Contribution (\$)	\$240.00
00/00/2024	· · · · · · · · · · · · · · · · · · ·			Φ 240.00
	Contributor address; City; State; Zip Code			
	League City, TX 77573			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u></u> ;)	
Not Employe		Not Employed	,	
Date	Full name of contributor out-of-state PAC (ID#:_		Amount of Contribution (\$)	
08/22/2024	Gordon, Heidi		Amount of Contribution (4)	\$120.00
00,22,202	Contributor address; City; State; Zip Code			<i>W</i>LUUUU
	Culturbulor address, City, State, Zip Code			
	League City, TX 77573			
Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions)	;)	
Not Employe		Not Employed	,	

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 7/15 Rpt: 10/26
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Texas Demo	ocratic Women of Galveston County		00083042
4 Date 08/23/2024			7 Amount of Contribution (\$) \$20.0
	League City, TX 77573		
8 Principal occup Not Employe	ipation / Job title (See Instructions) ed	9 Employer (See Instructions Not Employed	s)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/25/2024	Gordon, Heidi		\$20.0
	Contributor address; City; State; Zip Code League City, TX 77573		
Dringing occu		Employer (See Instruction)	
Principal occuj Not Employe	ipation / Job title (See Instructions)	Employer (See Instructions Not Employed	5)
			1
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/06/2024	Gordon, Heidi		\$50.0
	League City, TX 77573 Ipation / Job title (See Instructions)	Employer (See Instructions	s)
Not Employe	3d	Not Employed	
Date 07/18/2024	Full name of contributorout-of-state PAC (ID#: Graves, Ava Contributor address; City; State; Zip Code)	Amount of Contribution (\$)
	Beaumont, TX 77701		
Principal occuj Chaplain	ipation / Job title (See Instructions)	Employer (See Instructions BEST Hospice Care of	
Date 07/12/2024	Full name of contributor out-of-state PAC (ID#: Gregg, Brenda)	Amount of Contribution (\$) \$10.0
	Contributor address; City; State; Zip Code Galveston, TX 77551		
Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	s)
none	· · · · ·	none	

	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 8/15 Rpt: 11/26	
2	2 FILER NAME		3	Filer ID (Ethics Commission	n Filers)	
		ocratic Women of Galveston County			00083042	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/02/2024	Gregg, Brenda				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Galveston, TX 77551				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	none	1	none			
⊢	Date	Full name of contributor Out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	07/24/2024	Hall, Jim	/		,	\$60.00
	0.,			1		+ • • • • •
		Continuation address, City, State, Zip Code				
		Galveston, TX 77551				
\vdash	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	None		None	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	Г	Amount of Contribution (\$)	
	08/27/2024	Hall, Sharon	/			\$60.00
	0012112024					ψ00.00
		Contributor address; City; State; Zip Code				
		Galveston, TX 77551				
\vdash	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	None		None	<i>,</i>		
╘				-		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	+
	07/23/2024	Hightower, Richard]		\$250.00
		Contributor address; City; State; Zip Code				
	· · · ·	Houston, TX 77025		Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Justice ⊢irst	Court of Appeals	State of Texas			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/24/2024	Holmes, Stephen				\$120.00
		Contributor address; City; State; Zip Code		1		
		Dickinson, TX 77539				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Galveston County			
\vdash						

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: Sch: 9/15 Rpt: 122/26 2 FLER NAME Toxas Democratic Women of Galveston County 3 Flerin (Ethics Commission Filers) 00083042 4 Date 08/28/2024 Full name of contributor oxto-istate PAC (Dom) 7 Amount of Contribution (3) 9 \$125.00 8 Principal occupation / Job the (Gee Instructions) Not Employed 9 Employer (See Instructions) Not Employed Amount of Contribution (8) 9 Amount of Contribution (8) 9 \$20.00 Date 08/02/2024 Full name of contributor oxto-istate PAC (Dom Amount of Contribution (8) 9 \$80.00 Date 08/02/2024 Full name of contributor oxto-istate PAC (Dom Amount of Contribution (8) 9 \$20.40 Date 08/02/2024 Full name of contributor Employer (See Instructions) American National Amount of Contribution (8) \$20.41 \$20.42 Date 08/15/2024 Full name of contributor		
Texas Democratic Women of Galveston County 00083042 4 Date 5 Full name of contribution out-state PAC (IDI:::::::::::::::::::::::::::::::::::	The Instruction Guide explains how to complete this form.	
Texas Democratic Women of Galveston County 00083042 4 Date 5 Full name of contribution out-state PAC (IDI:::::::::::::::::::::::::::::::::::	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
08/28/2024 Hulen, Marion \$125.00 6 Contributor address; City; State; Zip Code \$125.00 7 Houston, TX 77063 9 Employer (See Instructions) Not Employed Date Full name of contributor out-of-state PAC (DB/ Katcher, Mariah Amount of Contribution (\$) Contributor address; City; State; Zip Code League City, TX 77573 Amount of Contribution (\$) Principal occupation / Job titie (See Instructions) Image processor Employer (See Instructions) American National Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (DB/ League City, TX 77573 Amount of Contribution (\$) \$20.44 Date Full name of contributor out-of-state PAC (DB/ League City, TX 77573 Amount of Contribution (\$) \$20.44 Date Full name of contributor out-of-state PAC (DB/ League City, TX 77573 Amount of Contribution (\$) \$250.00 Principal occupation / Job tite (See Instructions) Image processor Employer (See Instructions) American National Amount of Contribution (\$) \$250.00 Date Full name of contributor out-of-state PAC (DB/ Londau, Sarah Beth Contributor address; City; State; Zip Code Amount of Contribution (\$) \$250.00 Date Full name of contributor <td></td> <td></td>		
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6 Contributor address: City; State; Zip Code Houston, TX 77063 9 8 Principal occupation / Job title (See Instructions) Not Employed 9 Date Full name of contributor out-of-state PAC (Do:		\$125.00
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8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date 08/02/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$60.00 Date 08/02/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$60.00 Principal occupation / Job title (See Instructions) Image processor Employer (See Instructions) American National Amount of Contribution (\$) \$20.44 Date 08/29/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$20.44 Amount of Contribution (\$) \$20.44 Date 08/29/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$20.44 \$20.44 Date 08/129/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$20.44 \$20.44 Date 08/15/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$250.00 \$250.00 Principal occupation / Job title (See Instructions) Justice First Court of Appeals Employer (See Instructions) State of Texas Amount of Contribution (\$) \$50.00 Date 07/22/2024 Full name of contributor out-of-state PAC (ID#) Contributor address; City; State; Zip Code Dickinson, TX 77539 Amount of Contribution (\$) \$50.00		
8 Principal occupation / Job title (See Instructions) Not Employed 9 Employer (See Instructions) Not Employed Date 08/02/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$60.00 Date 08/02/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$60.00 Principal occupation / Job title (See Instructions) Image processor Employer (See Instructions) American National Amount of Contribution (\$) \$20.44 Date 08/29/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$20.44 Amount of Contribution (\$) \$20.44 Date 08/29/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$20.44 \$20.44 Date 08/129/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$20.44 \$20.44 Date 08/15/2024 Full name of contributor out-of-state PAC (ID#) Amount of Contribution (\$) \$250.00 \$250.00 Principal occupation / Job title (See Instructions) Justice First Court of Appeals Employer (See Instructions) State of Texas Amount of Contribution (\$) \$50.00 Date 07/22/2024 Full name of contributor out-of-state PAC (ID#) Contributor address; City; State; Zip Code Dickinson, TX 77539 Amount of Contribution (\$) \$50.00	Houston TX 77063	
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Justice First Court of Appeals State of Texas Date Full name of contributor out-of-state PAC (ID#:) 07/22/2024 Lowell, Kay \$50.00 Contributor address; City; State; Zip Code Dickinson, TX 77539 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Houston, TX 77009	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/22/2024 Lowell, Kay \$50.00 Contributor address; City; State; Zip Code Dickinson, TX 77539 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occupation / Job title (See Instructions) Employer (See Instructions)	s)
07/22/2024 Lowell, Kay \$50.00 Contributor address; City; State; Zip Code Dickinson, TX 77539 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Justice First Court of Appeals State of Texas	
Contributor address; City; State; Zip Code Dickinson, TX 77539 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
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Principal occupation / Job title (See Instructions) Employer (See Instructions)		
	Dickinson, TX 77539	
Retired None	Principal occupation / Job title (See Instructions) Employer (See Instructions)	s)
	Retired None	

	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 10/15 Rpt: 13/26	
2	2 FILER NAME		3	Filer ID (Ethics Commission	n Filers)	
		ocratic Women of Galveston County			00083042	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/07/2024	Markowitz, Forreste				\$36.00
		6 Contributor address; City; State; Zip Code		1		
Ļ		League City, TX 77573	<u> </u>	<u> </u>		
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Office Admin		Markowitz Law Firm	-		
	Date	Full name of contributor out-of-state PAC (ID#:_)	T	Amount of Contribution (\$)	
	08/26/2024	Massey, Lodie				\$60.00
		Contributor address; City; State; Zip Code				
		Galveston, TX 77554		Ĺ		
		ipation / Job title (See Instructions)	Employer (See Instructions	S)		
	Assistant Pro		UTMB			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/25/2024	Matula, Sherrie				\$500.00
		Contributor address; City; State; Zip Code				
		Hauston TV 770E0				
\vdash	Drinsipal acou	Houston, TX 77059		-)		
	Principal occu Retired	ipation / Job title (See Instructions)	Employer (See Instructions None	S)		
╘						
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 00.00
	07/02/2024	McAfee, Vanessa				\$20.00
		Contributor address; City; State; Zip Code				
		Texas City, TX 77599				
┝	Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	e)		
	Agent		Insurance Agency	5)		
┝				1		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀ1 20 በበ
	07/21/2024	McAfee, Vanessa				\$120.00
		Contributor address; City; State; Zip Code				
		Texas City, TX 77599				
\vdash	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Agent		Insurance Agency	.,		
┝						

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2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Texas Demo	ocratic Women of Galveston County		00083042
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
09/04/2024			\$20.00
	6 Contributor address; City; State; Zip Code		1
	Tauga City TV 77500		
Principal occu	Texas City, TX 77599 upation / Job title (See Instructions)	9 Employer (See Instructions	<u></u>
Agent		Insurance Agency	>)
			Amount of Contribution (\$)
Date 07/09/2024	Full name of contributor out-of-state PAC (ID#: McNearney, Lillie)	Amount of Contribution (\$) \$15.00
0110312024	Contributor address; City; State; Zip Code		ψ13.00
	Continuation address, City, State, Zip Code		
	League City, TX 77573		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	Σ δ)
Not Employe	èd	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
08/16/2024	Paul, Nakisha		\$60.00
	Contributor address; City; State; Zip Code		1
	Tayaa City TV 77501		
Principal occu	Texas City, TX 77591 upation / Job title (See Instructions)	Employer (See Instructions	<u></u>
Teacher		St Thomas	>)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
07/26/2024	Protas, Eugene	/	\$500.00
017201202	Contributor address; City; State; Zip Code		
	League City, TX 77573		
	ipation / Job title (See Instructions)	Employer (See Instructions	s)
Not Employe	ed	Not Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/03/2024	Purvis, Peggy		\$20.00
	Contributor address; City; State; Zip Code]
	Calvastan TV 77551		
Principal occu	Galveston, TX 77551 upation / Job title (See Instructions)	Employer (See Instructions	~\
Not employe		Not employed	>)
1401 011.0.0.5			

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2 FI	2 FILER NAME		3	Filer ID (Ethics Commission	ו Filers)	
	Texas Democratic Women of Galveston County			00083042		
4 D	ate	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
0	7/08/2024					\$25.00
		6 Contributor address; City; State; Zip Code		1		
		Galveston, TX 77551	-			
		pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
N	lot employe	d	Not employed			
	ate	Full name of contributor 🔲 out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
0	9/06/2024	Rivers, Constance				\$500.00
		Contributor address; City; State; Zip Code		1		
		Galveston, TX 77550	1			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
к	Retired		None			
	ate	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
0	7/30/2024	Robinson, Sally				\$200.00
		Contributor address; City; State; Zip Code		1		
	<u> </u>	Galveston, TX 77550		Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	hysician		UTMB			
	ate	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
0	8/08/2024	Russell, Nina]		\$60.00
		Contributor address; City; State; Zip Code				
		Komah TV 77565				
		Kemah, TX 77565		<u> </u>		
	rincipal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions None	5)		
				1		
	ate	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	÷00.00
U	8/19/2024	Saavedra, Rebecca				\$60.00
		Contributor address; City; State; Zip Code				
		League City, TX 77573				
			Employer (See Instructions	<u> </u>		
	lot employe	pation / Job title (See Instructions)	Employer (See Instructions Not employed	5)		
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2	2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Texas Democratic Women of Galveston County			00083042		
4	Date 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)		
	08/14/2024	Sanchez-Perez, Elias				\$100.00
	I	6 Contributor address; City; State; Zip Code				
		Houston, TX 77289				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Engineer		Self			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/16/2024	Shea, Marcia				\$60.00
	I	Contributor address; City; State; Zip Code		1		
		Friendswood, TX 77546				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/27/2024	Smith-Castro, Jennifer				\$250.00
	I	Contributor address; City; State; Zip Code		1		
		League City, TX 77573				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Biologist		Government			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/12/2024	Sylvester, Dinah				\$60.00
	I	Contributor address; City; State; Zip Code		1		
		League City, TX 77573	1			
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	None		None			
Γ	Date	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	09/01/2024	Sylvester, Dinah				\$30.00
		Contributor address; City; State; Zip Code]		
		League City, TX 77573	1			
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	None		None			

The Instruc	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 14/15 Rpt: 17/26	
2 FILER NAME			_	Filer ID (Ethics Commission	Filers)
	ocratic Women of Galveston County		1	00083042	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
07/04/2024	Van Fleet, Allan				\$20.00
	6 Contributor address; City; State; Zip Code		1		I
					ļ
					l
	Houston, TX 77081				
	pation / Job title (See Instructions)	9 Employer (See Instructions)			1
Lawyer		G. Allan Van Fleet P.C.			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
07/06/2024	Van Fleet, Allan				\$20.00
	Contributor address; City; State; Zip Code		1		ļ
					ļ
	Houston, TX 77081]			
	pation / Job title (See Instructions)	Employer (See Instructions)			I
Lawyer		McDermott Will & Emery	у 		
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
07/15/2024	Van Fleet, Allan				\$20.00
	Contributor address; City; State; Zip Code		1		
	Houston, TX 77081				
	pation / Job title (See Instructions)	Employer (See Instructions)			
Lawyer		G. Allan Van Fleet P.C.			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
07/20/2024	Van Fleet, Allan				\$20.00
	Contributor address; City; State; Zip Code		1		
	Houston, TX 77081				
	pation / Job title (See Instructions)	Employer (See Instructions)			
Lawyer		McDermott Will & Emery	-		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	-
09/05/2024	Van Fleet, Allan				\$20.00
	Contributor address; City; State; Zip Code				
	U.S				
	Houston, TX 77081		Ĺ		
	pation / Job title (See Instructions)	Employer (See Instructions)			
Lawyer		G. Allan Van Fleet P.C.			

The Instrue	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 15/15 Rpt: 18/26	
2 FILER NAME Texas Demo	ocratic Women of Galveston County		3 Filer ID (Ethics Commission 00083042	n Filers)
4 Date 09/07/2024	 Full name of contributor out-of-state PAC (ID#:_ Van Fleet, Allan)	7 Amount of Contribution (\$)	\$20.00
03/01/202-1	6 Contributor address; City; State; Zip Code			Ψ20.00
	Houston, TX 77081			
8 Principal occu Lawyer	pation / Job title (See Instructions)	9 Employer (See Instructions) McDermott Will & Emery		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/06/2024	Wilson, Angela Contributor address; City; State; Zip Code			\$50.00
	League City, TX 77573			
Principal occu None	pation / Job title (See Instructions)	Employer (See Instructions) None)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/06/2024	Young, Laura			\$100.00
	Contributor address; City; State; Zip Code			
	Contributor address; City; State; Zip Code Bacliff, TX 77518			
Principal occu None		Employer (See Instructions) None)	
	Bacliff, TX 77518	Employer (See Instructions) None) Amount of Contribution (\$)	
None	Bacliff, TX 77518 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ stevens, M	Employer (See Instructions) None		\$500.00
None Date	Bacliff, TX 77518 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:	Employer (See Instructions) None		\$500.00
None Date 07/14/2024	Bacliff, TX 77518 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ stevens, M Contributor address; City; State; Zip Code League City, TX 77573	Employer (See Instructions) None)	Amount of Contribution (\$)	\$500.00
None Date 07/14/2024	Bacliff, TX 77518 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ stevens, M Contributor address; City; State; Zip Code	Employer (See Instructions) None	Amount of Contribution (\$)	\$500.00
None Date 07/14/2024 Principal occu	Bacliff, TX 77518 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ stevens, M Contributor address; City; State; Zip Code League City, TX 77573 pation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID#:_ Full name of contributor	Employer (See Instructions) None)) Employer (See Instructions)	Amount of Contribution (\$)	
None Date 07/14/2024 Principal occu Agent	Bacliff, TX 77518 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ stevens, M Contributor address; City; State; Zip Code League City, TX 77573 pation / Job title (See Instructions)	Employer (See Instructions) None)) Employer (See Instructions)	Amount of Contribution (\$)	\$500.00
None Date 07/14/2024 Principal occu Agent Date	Bacliff, TX 77518 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ stevens, M Contributor address; City; State; Zip Code League City, TX 77573 pation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID#:_ Full name of contributor	Employer (See Instructions) None)) Employer (See Instructions)	Amount of Contribution (\$)	
None Date 07/14/2024 Principal occu Agent Date	Bacliff, TX 77518 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ stevens, M Contributor address; City; State; Zip Code League City, TX 77573 pation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID#:_ watford, alice	Employer (See Instructions) None)) Employer (See Instructions)	Amount of Contribution (\$)	
None Date 07/14/2024 Principal occu Agent Date 07/19/2024	Bacliff, TX 77518 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ stevens, M Contributor address; City; State; Zip Code League City, TX 77573 pation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_ watford, alice Contributor address; City; State; Zip Code	Employer (See Instructions) None)) Employer (See Instructions)	Amount of Contribution (\$)	

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

	The Instruc	ction Guide explains how to complete this form.	1 Total pages Schedule C1: Sch: 1/1 Rpt: 19/26
2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Texas Demo	cratic Women of Galveston County	00083042
4	Date	5 Corporation / Labor Organization name	7 Amount of contribution (\$)
	09/06/2024	PipeFitters #211 PAC Fund	\$500.00
	6 Corporation / Labor Organization address; City; State; Zip Code		
		Deerpark , TX 77536	
	Date	Corporation / Labor Organization name	Amount of contribution (\$)
	09/06/2024	Plumbers Local 68 PAC Fund	\$500.00
		Corporation / Labor Organization address; City; State; Zip Code	
		Houston, TX 77249	

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E /- Gift/Awards/Memorials Expense Printing I	payment/Reinbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District	
oreat outer ayment	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: 1/7 Rpt: 20/26	Texas Democratic Women of Galveston Coun	nty 00083042	
4 Date	5 Payee name		
07/02/2024	Act Blue		
6 Amount (\$)	7 Payee address; City; State; Zip C	code	
\$2.57	P.O. Box 441146		
Expenditure from corporate funds	Somerville, MA 02114-0031		
8 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	
		merchant fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office so H	ught Office held	
Date	Payee name		
07/09/2024	Act Blue		
Amount (\$)	Payee address; City; State; Zip C	code	
\$3.56	P.O. Box 441146		
\$0.00			
Expenditure from corporate funds	Somerville, MA 02114-0031		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense merchant fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	I Candidate/Officeholder name Office so H	l ught Office held	
Date	Davias name		
07/23/2024	Payee name Act Blue		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$3.02	P.O. Box 441146		
Expenditure from corporate funds	Somerville, MA 02114-0031		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense merchant fees	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	ught Office held	

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling F Gift/Awards/Memorials Expense Printing	epayment/Reimbursement Solicitation/Fundraising Expense tverhead/Rental Expense Transportation Equipment & Related Expense Expense Travel in District Expense Travel Out of District SWages/Contract Labor OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 2/7 Rpt: 21/26	Texas Democratic Women of Galveston Cour		
4 Date	5 Payee name		
07/30/2024	Act Blue		
6 Amount (\$)	7 Payee address; City; State; Zip C	Code	
\$2.97	P.O. Box 441146		
Expenditure from corporate funds	Somerville, MA 02114-0031	T	
8 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	
		merchant fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office so H	ought Office held	
Date	Payee name		
08/06/2024	Act Blue		
Amount (\$)	Payee address; City; State; Zip C	2ode	
.,		Jue	
\$27.26	P.O. Box 441146		
Expenditure from corporate funds	Somerville, MA 02114-0031		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense merchant fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	L Candidate/Officeholder name Office so H	Dught Office held	
Date	Payee name		
08/13/2024	Payee name Act Blue		
Amount (\$)	Payee address; City; State; Zip C	Code	
\$118.12	P.O. Box 441146		
Expenditure from corporate funds	Somerville, MA 02114-0031		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense merchant fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	ought Office held	

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office C Food/Beverage Expense Polling - Gift/Awards/Memorials Expense Printing	epayment/Reimbursement Iverhead/Rental Expense Expense Expense /Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILED NAME		Filer ID (Ethics Commission Filers)	
Sch: 3/7 Rpt: 22/26	Texas Democratic Women of Galveston Cou		00083042	
4 Date	5 Payee name			
08/20/2024	Act Blue			
6 Amount (\$)	7 Payee address; City; State; Zip (Code		
\$45.43	P.O. Box 441146			
Expenditure from corporate funds	Somerville, MA 02114-0031			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		e of Texas. Complete Schedule T. Ifficeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office so	bught	Office held	
Date	Payee name			
08/27/2024	Act Blue			
Amount (\$)	Payee address; City; State; Zip (`ode		
\$67.58	P.O. Box 441146	Juie		
Expenditure from corporate funds	Somerville, MA 02114-0031	1		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		e of Texas. Complete Schedule T. officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	pught	Office held	
Date	Payee name			
09/10/2024	Act Blue			
Amount (\$)	Payee address; City; State; Zip (Code		
\$3.76	P.O. Box 441146			
Expenditure from corporate funds	Somerville, MA 02114-0031			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		e of Texas. Complete Schedule T. officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office se	bught	Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Rep Fees Office Ove Food/Beverage Expense Polling Ex Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement Prhead/Rental Expense pense ypense /ages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)
Sch: 4/7 Rpt: 23/26	Texas Democratic Women of Galveston Count	y	00083042
4 Date	5 Payee name		
09/24/2024	Act Blue		
6 Amount (\$) \$1.58	7 Payee address; City; State; Zip Co P.O. Box 441146	de	
Expenditure from corporate funds	Somerville, MA 02114-0031		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		de of Texas. Complete Schedule T. officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sou	ght	Office held
Date	Payee name		
09/23/2024	Carvajal Creative		
Amount (\$)	Payee address; City; State; Zip Co	de	
\$378.88	9530 Meadowglen		
Expenditure from corporate funds	Houston, TX 77063		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		de of Texas. Complete Schedule T. officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held
Date	Payee name		
08/30/2024	Disc Pro Printing		
Amount (\$)	Payee address; City; State; Zip Co	de	
\$450.00	339 Greens Landing Dr.		
Expenditure from corporate funds	Houston, TX 77038		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		de of Texas. Complete Schedule T. officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sou	ght	Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Re Fees Office O Food/Beverage Expense Polling E Gift/Awards/Memorials Expense Printing f	ayment/Reimbursement So erhead/Rental Expense Tra xpense Tra xpense Tra Vages/Contract Labor OT	licitation/Fundraising Expense ansportation Equipment & Related Expense avel in District avel Out of District I'HER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Fil	ler ID (Ethics Commission Filers)
Sch: 5/7 Rpt: 24/26	Texas Democratic Women of Galveston Coun		0083042
4 Date	5 Payee name		
09/10/2024	Esteban's		
6 Amount (\$)	7 Payee address; City; State; Zip C	ode	
\$300.00	402 East Main		
Expenditure from corporate funds	League City, TX 77573		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Event Expense		of Texas. Complete Schedule T.
		Check if Austin, TX, offi	ceholder living expense
		Event Deposit	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sol	ight	Office held
Date	Payee name		
09/26/2024	Esteban's		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$893.06	402 East Main		
\$000.00			
Expenditure from corporate funds	League City, TX 77573		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Check if Austin, TX, offin Event Expense	of Texas. Complete Schedule T. ceholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sol H	lght	Office held
Date	Payee name		
09/11/2024	Gordon, Frank		
		odo	
Amount (\$)		Jue	
\$2,650.57	1201 Newport Blvd		
Expenditure from corporate funds	League City, TX 77573		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Loan Repayment/Reimbursement		of Texas. Complete Schedule T.
		Check if Austin, TX, offi	
		Reimbursement for	r Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ight	Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 6/7 Rpt: 25/26	Texas Democratic Women of Galveston County00083042	
4 Date	5 Payee name	
09/04/2024	Harland Clarke	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$41.99	15955 La Cantera Pkwy	
Expenditure from corporate funds	San Antonio, TX 78256	
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	
	Administrative Supplies	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
07/24/2024	LaBrisa	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	501 N Wesley Dr.	
Expenditure from corporate funds	League City, TX 77573	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Deposit 	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
08/23/2024	South Shore Harbour Resort and Conference Center	
Amount (\$)	Payee address; City; State; Zip Code	
\$213.57	2500 South Shore BLVD	
Expenditure from corporate funds	League City, TX 77573	
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Expense 	
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting 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: 7/7 Rpt: 26/26	Texas Democratic Women of Galveston County 00083042	
4 Date 07/01/2024	5 Payee name Zoom	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$34.09	55 Almaden Blvd	
	6th Floor	
Expenditure from corporate funds	San Jose, CA 95113	
8 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	
	Virtual Meeting Platform	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
08/01/2024	Zoom	
Amount (\$)	Payee address; City; State; Zip Code	
\$34.09	55 Almaden Blvd	
	6th Floor	
Expenditure from corporate funds	San Jose, CA 95113	
PURPOSE OF EXPENDITURE	 (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. Check if Austin, TX, officeholder living expense Virtual Meeting Platform 	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
09/01/2024	Zoom	
Amount (\$)	Payee address; City; State; Zip Code	
\$34.09	55 Almaden Blvd	
÷	6th Floor	
Expenditure from corporate funds	San Jose, CA 95113	
PURPOSE OF EXPENDITURE	 (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. Check if Austin, TX, officeholder living expense Virtual Meeting Platform 	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	