FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00084222 3 COMMITTEE NAME **OFFICE USE ONLY** Plano Area Democrats Date Received **ELECTRONICALLY FILED** 10/31/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 251373 Date Hand-delivered or Date Postmarked Change of Address Plano, TX 75025 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Irvin NAME NICKNAME LAST **SUFFIX** Barrett STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1119 Shadow Lakes Blvd. STREET **ADDRESS** (Residence or Business) Allen, TX 75002 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1119 Shadow Lakes Blvd. MAILING **ADDRESS** Allen, TX 75002 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (847) 903-8222 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2024 10/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)		
Plano Area Democrats	5		00084222			
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Kamala Harris President of th	ne United States	S		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M X check here if this report	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	394.40		
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	712.40		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	827.86		
	4. TOTAL POLITICA	L EXPENDITURES	\$	2,439.96		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	T DAY \$	3,139.52		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	812.10		
16 AFFIDAVIT			<u> </u>			
		I swear, or affirm, under penalty of p true and correct and includes all info under Title 15, Election Code.				
		Irvin	ı Barrett			
		Signature of Ca	ampaign Treasur	er		
AFFIX NOTAR	Y STAMP / SEAL ABOVE					
Sworn to and subscribe	d before me, by the said _		this the	day		
	of, 20, to certify which, witness my hand and seal of office.					
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of office	er administering oath		

FORM GPAC ADDENDUM

Page 3 of 17

						rage 3 of 17
12	COMMITTEE NAME					13 Filer ID (Ethics Commission Filers)
	Plano Area Democrats					00084222
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Supported	Rep. Colin Allred United States	Senator
	(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.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Supported	Sandeep Srivastava United Stat	tes Representative
	(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.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Supported	Simon Cardell United States Re	presentative
	(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.)		Supported		
			B.	Opposed		
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 4 of 17

							.go 1 01 11
12 COMMITTEE NA	ME			:	13 Filer ID	(Ethics Comm	ission Filers)
Plano Area De	nocrats				00084222		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Julie Johnson U	Jnited States	Representati	ve	
(Attach lists on p paper to complet report if necessa	e this	B. Opposed					
	Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	Officeholders Assisted (Identify by name or, if applicable, classify by party.))					
COMMITTEE	1. Candidates		Katherine Culbert Rai	ilroad Comp	nissioner		
ACTIVITY	(Identify by name or, if applicable, classify by party.		ratherine Calbert Train	roda Corriir	iliooloriei		
(Attach lists on p paper to complet report if necessa	e this	B. Opposed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	Officeholders Assisted (Identify by name or, if applicable, classify by party.						
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.	A. Supported	George King State Bo	oard Of Edu	cation		
(Attach lists on p paper to complet report if necessa	e this	B. Opposed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	Officeholders Assisted (Identify by name or, if applicable, classify by party.						
	Assisted)					

FORM GPAC ADDENDUM

Page 5 of 17

							rage 3 01 17
12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	Plano Area Democrats					00084222	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ipported	Rachel Mello State Senator		
	(Attach lists on plain paper to complete this report if necessary.)		В. Ор	posed			
		2. Measures	A. Su	ipported			
		(Describe by date and location of election and nature of issue.)					
			В. Ор	posed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE	Candidates	-	innorted	David Carstens State Represen	totivo	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		ipported	David Carsteris State Represen	lialive	
	(Attach lists on plain paper to complete this report if necessary.)		В. Ор	posed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Su	ipported			
			В. Ор	posed			
		3. Officeholders Assisted					
		(Identify by name or, if applicable, classify by party.))				
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ipported	Makala Washington State Repre	esentative	
	(Attach lists on plain paper to complete this report if necessary.)		В. Ор	posed			
		2. Measures	A. Su	pported			
		(Describe by date and location of election and nature of issue.)					
			В. Ор	pposed			
		Officeholders Assisted (Identify by name or, if)					
		applicable, classify by party.))				

FORM GPAC ADDENDUM

Page 6 of 17

					1 ago 0 ol 11
12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	Plano Area Democrats				00084222
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Rep. Mihaela Plesa State Repre	esentative
	(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.)			
	COMMITTEE	1. Candidates	A. Supported	Stephanie Cooksey Collin Coun	ty Tax Assessor-Collector
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		· ,	
	(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.)			
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Yvette Johnson Collin County C	Commissioner, Precinct 3
	(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		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)			

FORM GPAC ADDENDUM

Page 7 of 17

											Fage	7 01 17
12	COMMITTEE NAME							13 Filer II)	(Ethics	Commissi	on Filers)
	Plano Area Democrats							00084	1222			
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supporte	ed Ce	sar Avila	Constab	e, Collin C	ounty Pre	cinct 3	3		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	t								
		2. Measures	A. Supporte	ed								
		(Describe by date and location of election and nature of issue.)										
			B. Opposed	t								
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)										
	COMMITTEE	Candidates	<u> </u>	ad Iuc	dae Dese	an lonoc	Cupromo	Court luc	tion			
	ACTIVITY	(Identify by name or, if	A. Supporte	Ju(uge Dese	an Junes	Supreme	Court Jus	uce			
		applicable, classify by party.)										
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	d								
		Measures (Describe by date and	A. Supporte	ed								
		location of election and nature of issue.)										
			B. Opposed	t								
		Officeholders Assisted										
		(Identify by name or, if applicable, classify by party.)										
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supporte	ed Juo	dge Chris	tine Weei	ns Suprei	ne Court 3	Justice			
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	d								
		2. Measures	A. Supporte	ed								
		(Describe by date and location of election and nature of issue.)										
			B. Opposed	d								
		Officeholders Assisted										
_		(Identify by name or, if applicable, classify by party.)										

FORM GPAC ADDENDUM

Page 8 of 17

					1 ago o o 1 11
12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	Plano Area Democrats				00084222
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Judge Bonnie Goldstein Supren	ne Court Justice
	(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		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE	1. Candidates	A. Supported	Holly Taylor Court of Criminal A	ppeals, Presiding Judge
	ACTIVITY	(Identify by name or, if applicable, classify by party.)			
	(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.)			
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Nancy Mulder Court Of C	Criminal Appeals, Judge
	(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		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
		1 , , -, -, -, -, -, -, -,	I		

FORM GPAC ADDENDUM

Page 9 of 17

					1 ago 0 01 11
12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	Plano Area Democrats				00084222
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Judge Chika Anyiam Court Of C	Criminal Appeals, Judge
	(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		
		nature of issue.	B. Opposed		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE	1. Candidates	A. Supported	Judge Staci Williams Court of A	appeals, Chief Justice
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		S .	
	(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.)			
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Robbie Partida-Kipness	Court Of Appeals, Justice
	(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		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
			<u>I</u>		

FORM GPAC ADDENDUM

Page 10 of 17

						1 ago 10 01 11
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Plano Area Democrats				00084222	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Judge Erin Nowell Court Of App	eals, Justice	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)	2.5 [1]			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	<u> </u>		Judge Tine Olimber Co. 4 Of 1	anda Ivetti	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if	A. Supported	Judge Tina Clinton Court Of App	peais, Justice	
		applicable, classify by party.)				
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		·	B. Opposed			
		Officeholders Assisted (Identify by name or, if				
		applicable, classify by party.)				
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Judge Amanda Reichek Court C	Of Appeals, Jus	ice
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		Officeholders Assisted				
		(Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 11 of 17

						1 ago 11 01 11
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Plano Area Democrats				00084222	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Kim Cooks Court Of Appeals, Ju	ustice	
	(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			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A Supported	Judge Ken Molberg Court Of Ap	neals luctics	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Judge Ken Molberg Count Of Ap	peais, Justice	
	(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.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Tonya Parker Court Of A	ppeals, Justice	
	(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			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
		1	l			

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			12 of 17					
17 COMMITTE Plano Are	EE NAME a Democrats	18 Filer ID 00084222	(Ethics Commission Filers)					
19 SCHEDULI	E SUBTOTALS		OURTOTAL AMOUNT					
NAME OF	SCHEDULE		SUBTOTAL AMOUNT					
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 712.40					
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$					
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS							
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$					
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$					
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$					
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$					
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$					
9. X	SCHEDULE E: LOANS		\$ 812.10					
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$ 2,439.96					
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$					
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$					
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$					

	MONEI	ARY POLITICAL C	ONTRIBUTIO	'N:	S		SCHEDULE	: A1
	The Instru	ction Guide explains how	to complete this fo	=== orm	1.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 13/17	
2	FILER NAME Plano Area D					3	Filer ID (Ethics Commission 00084222	Filers)
4	Date 07/23/2024	Full name of contributor Calderon, Rosemary Contributor address; City; Sta	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$10.00
•	Dringing Loon	Frisco, TX 75034			Employer (Cae Instructions	<u></u>		
8	not employed	upation / Job title (See Instructions)			Employer (See Instructions none	5)		
	Date 07/22/2024	Full name of contributor [Collier, Carla Contributor address; City; Sta	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$30.00
	Dringinal occu	Dallas, TX 75243			Employer (See Instructions	·,		
		ontracts Management			Employer (See Instructions Dallas Fort Worth Intern		onal Airport	
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$7.00	
 		Plano, TX 75023						
	Principal occu Marketing As	upation / Job title (See Instructions) ssistant		Employer (See Instructions Service Experts				
	Date 08/09/2024	Full name of contributor Hulse, Anna Contributor address; City; Sta Plano, TX 75023	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$7.00
		upation / Job title (See Instructions) ssistant			Employer (See Instructions Service Experts	<u>(</u>		
	Date 09/09/2024	arketing Assistant Service Experts te Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$7.00	
	Principal occu Marketing As	upation / Job title (See Instructions) ssistant			Employer (See Instructions Service Experts	5)		
			·					

	MONET	ARY POLITICAL C	CONTRIBUTIO	N:	S 		SCHEDUL	E A1
	The Instru	ruction Guide explains how to complete this form.					Total pages Schedule A1: Sch: 2/2 Rpt: 14/17	
2	FILER NAME Plano Area [Democrats				3	Filer ID (Ethics Commission 00084222	n Filers)
4	Date 10/09/2024					7	Amount of Contribution (\$)	\$7.00
		Plano, TX 75023						
8	Principal occu Marketing As	pation / Job title (See Instructions ssistant) [9		Employer (See Instructions Service Experts	s)		
	Date 10/16/2024	Full name of contributor Jones, DaSean (Judge) Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu Judge	Houston, TX 77002 pation / Job title (See Instructions)		Employer (See Instructions State of Texas	<u> </u> 5)		
	Date 10/13/2024	Full name of contributor McCann, Stephanie Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Plano, TX 75075						
	Principal occupation / Job title (See Instructions) Accounting Manager				Employer (See Instructions 7-Eleven Inc.	5)		
	Date 10/14/2024	Full name of contributor Patel, Hemant Contributor address; City; St Richardson, TX 75082	out-of-state PAC (ID#: ate; Zip Code				Amount of Contribution (\$)	\$100.00
	Principal occupation / Job title (See Instructions) not employed				Employer (See Instructions none	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 7/22/2024 Thompson, Ramona Contributor address; City; State; Zip Code Frisco, TX 75036)		Amount of Contribution (\$)	\$25.00		
	Principal occu none	pation / Job title (See Instructions)		Employer (See Instructions not employed	;)		
			<u>'</u>					

	LOANS							SCHEDULE E	
	The Instruction	n Guide explains h	ow to c	omplete this 1	form.	1	•	ges Schedule E: 1 Rpt: 15/17	
2	FILER NAME Plano Area Dem	ME 3 Filer ID				(Ethics Commission Filers)			
4	TOTAL OF UN	ITEMIZED LOANS				<u>-I</u>		\$	
5	Date of loan	7 Name of lender		out-of-state PA	AC (ID#:)	9 Loan Amount (\$)	
	10/07/2024	Omere, Iroghama						\$478.04	
6	Is lender a financial institution?	8 Lender address;	City;	State;	Zip Code			10 Interest Rate 0 11 Maturity Date	
		Plano, TX 75023						12/31/2024	
12		on / Job title (See Instruction	ons)		13 Employer (See Instruction		District		
1/	Educator Description of Coll	atoral			Plano Independent Sch 15 Check if personal funds w			Linto political appount	
14	X None	aterai			N/A	(See Instructions)			
16	GUARANTOR INFORMATION	17 Name of guarantor						19 Amount Guaranteed (\$)	
	X not applicable	18 Guarantor address;	City;	State;	Zip Code				
20	Principal occupation	on			21 Employer (See Instruction	ıs)		1	
	Date of loan	Name of lender		out-of-state PA	AC (ID#:)	Loan Amount (\$)	
	10/09/2024	Omere, Iroghama						\$334.06	
	Is lender a financial institution?	Lender address;	City;	State;	Zip Code			Interest Rate	
	No	Plano, TX 75023						Maturity Date 12/31/2024	
	Principal occupation	on / Job title (See Instruction	ons)		Employer (See Instruction	ıs)		12/01/2024	
Educator					Plano Independent School District				
Description of Collateral X None					Check if personal funds were deposited N/A			l into political account (See Instructions)	
	GUARANTOR INFORMATION	Name of guarantor			I			Amount Guaranteed (\$)	
	X not applicable	Guarantor address;	City;	State;	Zip Code				
Principal occupation				Employer (See Instructions)					

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4. Total name Oct. 11. 51	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1:	
Sch: 1/2 Rpt: 16/17	Plano Area Democrats 00084222
4 Date	5 Payee name
10/12/2024	Collective PAC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	2101 L Street NW, Suite 300
Expenditure from	Washington, DC 20037
corporate funds	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Sponsorship of Texas delegation event at the
	Democratic National Convention in Chicago
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/07/2024	Keepers Press
Amount (\$)	Payee address; City; State; Zip Code
\$478.04	1905 Alpha Drive, Suite 170
Expenditure from corporate funds	Rockwall, TX 75087
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	printing 4' x 4' signs
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
D-1-	
Date	Payee name
07/11/2024	Micropix Media LLC
Amount (\$)	Payee address; City; State; Zip Code
\$300.00	4003 Jasmine Fox Lane
Funonditure from	
Expenditure from corporate funds	Arlington, TX 76005-4545
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	website updates
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice/Magne/Contract Labor

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Committee	Gift/Awards/Memorials Exp Legal Services The Instruction Guide	Salaries	Expense Wages/Contract Labor	Travel Out of District Travel Out of District OTHER (enter a category not listed abo	ve)
1	Total pages Schedule F1:	2 FILER NAMI	E			3 Filer ID (Ethics Commission	on Filers)
	Sch: 2/2 Rpt: 17/17	Plano Area	Democrats			00084222	
4	Date	5 Payee name	•				
	10/09/2024	Vistaprint					
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	ode		
	\$334.06	95 Hayden	Avenue				
	Expenditure from corporate funds	Lexington,	MA 02421				
8	PURPOSE	(a) Category (S	See Categories listed at the t	op of this schedule)	(b) Description		
	OF EXPENDITURE	Printing Ex	pense			outside of Texas. Complete Schedule T.	
						n, TX, officeholder living expense	
					printing of sl	ale cards	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Off H	ïceholder name	Office so	ught	Office held	