#### 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) 00053855 3 COMMITTEE NAME **OFFICE USE ONLY** Stonewall Democrats of Dallas PAC Date Received **ELECTRONICALLY FILED** 10/27/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 192305 Date Hand-delivered or Date Postmarked Change of Address Dallas, TX 75219 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** James NAME NICKNAME LAST **SUFFIX** Havran STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4224 Rawlins Street #104 STREET **ADDRESS** (Residence or Business) Dallas, TX 75219 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 4224 Rawlins Street #104 MAILING **ADDRESS** Dallas, TX 75219 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (972) 689-7665 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 Year 10 PERIOD Month Day Year Day Month **COVERED THROUGH** 09/27/2024 10/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME		13 Filer ID	(Ethics Commission Filers)	
Stonewall Democrats of Dallas PAC		00053855		
14 COMMITTEE ACTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Kamala Harris US President			
(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)	)			
	B. Opposed			
Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)				
TOTALS  PLEDGES, LOANS  CONTRIBUTIONS  check here if this repo	D POLITICAL CONTRIBUTIONS (OTHER THAN , OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) t qualifies for the higher itemization threshold	\$	0.00	
	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,400.00	
EXPENDITURE 3. TOTAL UNITEMIZE TOTALS	D POLITICAL EXPENDITURES	\$	0.00	
4. TOTAL POLITIC	4. TOTAL POLITICAL EXPENDITURES			
CONTRIBUTION 5. TOTAL POLITICAL OF THE REPORTI	CONTRIBUTIONS MAINTAINED AS OF THE LAST NG PERIOD	DAY \$	27,808.42	
	AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00	
16 AFFIDAVIT		<u>'</u>		
	I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.			
	James	Havran		
	Signature of Car	npaign Treasur	er	
AFFIX NOTARY STAMP / SEAL ABOVE				
Sworn to and subscribed before me, by the said	, th	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	

# FORM GPAC ADDENDUM

Page 3 of 35

						rage 3 01 33
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Stonewall Democrats of	Dallas PAC			00053855	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Tim Walz US Vice President		
	(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.)				
	COMMITTEE	1. Candidates		Rep. Colin Allred US Senate		
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Rep. Com Amed 03 Senate		
	(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.)		Ruth Torres US Rep - District 5		
	(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 4 of 35

						rage 4 01 33
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Stonewall Democrats of	Dallas PAC			00053855	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Sam Eppler US Rep - District 24	1	
	(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	1. Candidates (Identify by name or, if applicable, classify by party.)		Rep. Jasmine Crockett US Rep	- District 30	
	(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.)		Julie Johnson US Rep - District	32	
	(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.)				

## FORM GPAC ADDENDUM

Page 5 of 35

COMMITTEE NAME Stonewall Democrats of COMMITTEE	Dallas PAC			13 Filer ID (Ethics Commission Filers)
COMMITTEE	Dallas PAC			
COMMITTEE				00053855
ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Marc Veasey US Rep - Dis	L strict 33
Attach lists on plain paper to complete this eport 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	Judge DaSean Jones TX Supre	me Court. Place 2
ACTIVITY	(Identify by name or, if		oudge Bussan bones 17. Supre	
Attach lists on plain paper to complete this eport 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 ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Judge Christine Vinh Weems TX	K Supreme Court, Place 4
Attach lists on plain paper to complete this eport 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.)			
	ACTIVITY  Attach lists on plain paper to complete this peport if necessary.)  COMMITTEE ACTIVITY  Attach lists on plain paper to complete this paper to complete this	(Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  Attach lists on plain paper to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  4. Candidates (Identify by name or, if applicable, classify by party.)  5. COMMITTEE (Identify by name or, if applicable, classify by party.)  4. Candidates (Identify by name or, if applicable, classify by party.)  5. Measures (Describe by date and location of election and nature of issue.)  7. Measures (Describe by date and location of election and nature of issue.)	(Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  Attach lists on plain paper to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  B. Opposed  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.)  COMMITTEE ACTIVITY  2. Measures (Identify by name or, if applicable, classify by party.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  B. Opposed  Committee (Identify by name or, if applicable, classify by party.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  B. Opposed  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  B. Opposed	Committee  3. Officeholders Assisted (Jescribe by date and location of election and nature of issue.)  3. Officeholders Assisted (Jescribe by date and location of election and nature of issue.)  4. Supported Judge DaSean Jones TX Supre Judge to complete this eport if necessary.)  5. OMMITTEE  2. Measures (Describe by date and location of election and nature of issue.)  5. OMMITTEE COMMITTEE  2. Measures (Describe by date and location of election and nature of issue.)  6. Opposed  7. Candidates (Jescribe by name or, if applicable, classify by party.)  8. Opposed  8. Opposed  9. Opposed  1. Candidates (Jescribe by name or, if applicable, classify by party.)  8. Opposed  9. Opposed  1. Candidates (Jescribe by name or, if applicable, classify by party.)  8. Opposed  1. Candidates (Jescribe by name or, if applicable, classify by party.)  8. Opposed  1. Candidates (Jescribe by date and location of election and nature of issue.)  8. Opposed  1. Candidates (Jescribe by date and location of election and nature of issue.)  8. Opposed  1. Candidates (Jescribe by date and location of election and nature of issue.)  8. Opposed  1. Candidates (Jescribe by date and location of election and nature of issue.)  9. Opposed  1. Candidates (Jescribe by date and location of election and nature of issue.)  1. Candidates (Jescribe by date and location of election and nature of issue.)  1. Candidates (Jescribe by date and location of election and nature of issue.)  1. Candidates (Jescribe by date and location of election and nature of issue.)

## FORM GPAC ADDENDUM

Page 6 of 35

COMMITTEE NAME				
				13 Filer ID (Ethics Commission Filers)
Stonewall Democrats of	Dallas PAC			00053855
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Judge Bonnie Lee Goldstein T>	C Supreme Court, Place 6
(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	Judge Holly Taylor Court of Crit	minal Appeals. Presiding Judge
ACTIVITY	(Identify by name or, if		oaago nony raylor coareo. C	a., ppsac, 1155iai.ig 5aag
(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	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		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	ACTIVITY  (Attach lists on plain paper to complete this eport if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this eport if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this eport if necessary.)	Activity  Actach lists on plain paper to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  Actach lists on plain paper to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  4. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  4. Candidates (Identify by name or, if applicable, classify by party.)  5. Measures (Describe by date and location of election and nature of issue.)  1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	ACTIVITY Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  Attach lists on plain paper to complete this report if necessary.)  1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  4. Supported Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  4. Supported Describe by date and location of election and nature of issue.)  5. Measures (Describe by date and location of election and nature of issue.)  6. Opposed Describe by date and location of election and nature of issue.)  7. Candidates (Identify by name or, if applicable, classify by party.)  8. Opposed Describe by date and location of election and nature of issue.)  8. Opposed Describe by date and location of election and nature of issue.)  8. Opposed Describe by date and location of election and nature of issue.)  8. Opposed Describe by date and location of election and nature of issue.)	Attach lists on plain super to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of fisure)  3. Officeholders Assisted (Describe this eport if necessary.)  2. Measures (Describe by date and location of election and nature of fisure)  3. Officeholders Assisted (Describe by date and location of election and nature of fisure)  3. Officeholders Assisted (Describe by date and location of election and nature of fisure)  3. Officeholders Assisted (Describe by date and location of election and nature of fisure)  4. Supported Judge Holly Taylor Court of Critical Complete this eport if necessary.)  5. Opposed Describe by date and location of election and nature of fisure)  6. Opposed Describe by date and location of election and nature of fisure)  7. Match lists on plain saper to complete this eport if necessary.)  8. Opposed Describe by date and location of election and nature of fisure)  8. Opposed Describe by date and location of election and nature of fisure)  8. Opposed Describe by date and location of election and nature of fisure)  8. Opposed Describe by date and location of election and nature of fisure)  9. Opposed Describe by date and location of election and nature of fisure)  9. Opposed Describe by date and location of election and nature of fisure)  9. Opposed Describe by date and location of election and nature of fisure)  9. Opposed Describe by date and location of election and nature of fisure)  9. Opposed Describe by date and location of election and nature of fisure)  9. Opposed Describe by date and location of election and nature of fisure)  9. Opposed Describe by date and location of election and nature of fisure)  9. Opposed Describe by date and location of election and nature of fisure)  9. Opposed Describe by date and location of election and nature of fisure of fisure)

## FORM GPAC ADDENDUM

Page 7 of 35

COMMITTEE NAME Stonewall Democrats of				13 Filer ID (Ethics Commission Filers)
Stonewall Democrats of				10 1 Hel 1B (Euroce Commission Fine Co)
Storiewali Democrats of	Dallas PAC			00053855
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Judge Chika Anyiam Court Of C	I Criminal Appeals, Judge
(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	1. Candidates	A. Supported	Rayna Glasser, State Board Of I	Education
ACTIVITY	(Identify by name or, if		Traylla Glassel Grate Board Gr	Ladoution
(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.)		George King State Board Of Ed	lucation
(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.)			
	Attach lists on plain paper to complete this eport if necessary.)  COMMITTEE ACTIVITY  Attach lists on plain paper to complete this eport if necessary.)  COMMITTEE ACTIVITY  Attach lists on plain paper to complete this eport if necessary.	Attach lists on plain paper to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  Attach lists on plain paper to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted  3. Officeholders Assisted	Attach lists on plain paper to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  Attach lists on plain paper to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  4. Supported Describe by date and location of election and nature of issue.)  5. Measures (Identify by name or, if applicable, classify by party.)  6. Opposed Describe by date and location of election and nature of issue.)  8. Opposed Describe by date and location of election and nature of issue.)  8. Opposed Describe by date and location of election and nature of issue.)  8. Opposed Describe by date and location of election and nature of issue.)  8. Opposed Describe by date and location of election and nature of issue.)  8. Opposed Describe by date and location of election and nature of issue.)  8. Opposed Describe by date and location of election and	Attach lists on plain applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identity by name or, if applicable, classify by party.)  Attach lists on plain apper to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  A. Supported Rayna Glasser State Board Of it applicable, classify by party.)  B. Opposed  B. Opposed  B. Opposed  Committee (Identity by name or, if applicable, classify by party.)  B. Opposed  B. Opposed  B. Opposed  Committee (Identity by name or, if applicable, classify by party.)  B. Opposed  Committee (Identity by name or, if applicable, classify by party.)  Committee (Identity by name or, if applicable, classify by party.)  Committee (Identity by name or, if applicable, classify by party.)  B. Opposed  Committee (Identity by name or, if applicable, classify by party.)  B. Opposed  Committee (Identity by name or, if applicable, classify by party.)  B. Opposed  Committee (Identity by name or, if applicable, classify by party.)  B. Opposed  Committee (Identity by name or, if applicable, classify by party.)  B. Opposed

## FORM GPAC ADDENDUM

Page 8 of 35

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Stonewall Democrats of	Dallas PAC			00053855	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Tiffany Clark State Board Of Ed	L ucation	
	(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	Katherine Culbert Railroad Com	nmissioner	
	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	Stephanie Draper State Senator	r	
	(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 9 01 35
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Stonewall Democrats of	Dallas PAC			00053855	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Rep. Nathan Johnson State Ser	nator	
(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	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Sen. Royce West State Senator	•	
(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.)		Rep. Ana-Maria Ramos State R	epresentative	
(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 10 of 35

		1 ago 10 01 00
12 COMMITTEE NAME		13 Filer ID (Ethics Commission Filers)
Stonewall Democrats of Dallas PAC		00053855
14 COMMITTEE 1. Candidates ACTIVITY (Identify by name o applicable, classify	r, if	I !epresentative
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed	
2. Measures (Describe by date a location of election nature of issue.)		
	B. Opposed	
3. Officeholde Assisted (Identify by name o applicable, classify	r, if	
COMMITTEE 1. Candidates	A. Supported Rep. Rafael Anchía State F	======================================
ACTIVITY (Identify by name o applicable, classify	r, if	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed	
2. Measures (Describe by date a location of election nature of issue.)		
	B. Opposed	
3. Officeholde Assisted (Identify by name o applicable, classify	r, if	
COMMITTEE 1. Candidates ACTIVITY (Identify by name o applicable, classify	A. Supported Rep. Jessica González Sta	te Representative
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed	
2. Measures (Describe by date a location of election nature of issue.)	A. Supported	
	B. Opposed	
3. Officeholde Assisted (Identify by name o applicable, classify	r, if	
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## FORM GPAC ADDENDUM

Page 11 of 35

COMMITTEE NAME Stonewall Democrats of COMMITTEE ACTIVITY	Dallas PAC  1. Candidates			<b>13</b> Filer ID 00053855	(Ethics Commission Filers)
COMMITTEE				00053855	
	1. Candidates			<u> </u>	
	(Identify by name or, if applicable, classify by party.)		Rep. Terry Meza State Represe	ntative	
Attach lists on plain paper to complete this eport if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)	7t. Supported			
		B. Opposed			
	Officeholders     Assisted     (Identify by name or, if				
COMMITTEE	(Identify by name or, if		Linda Garcia State Representat	ive	
Attach lists on plain paper to complete this eport if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Elizabeth Ginsberg State Repre	sentative	
Attach lists on plain paper to complete this eport 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.)				
	Attach lists on plain paper to complete this eport if necessary.)  COMMITTEE COMMITTEE  Attach lists on plain paper to complete this	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  Attach lists on plain aper to complete this apport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  Attach lists on plain aper to complete this apport if necessary.)  2. Measures (Identify by name or, if applicable, classify by party.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  3. Officeholders (Describe by date and location of election and nature of issue.)	Committee   Comm	Committee   Comm	location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  Attach lists on plain aper to complete this apport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  B. Opposed  B. Opposed  4. Supported  B. Opposed  B. Opposed  4. Supported  B. Opposed  5. OMMITTEE (CTIVITY  CTIVITY  CTIVITY  CTIVITY  CTIVITY  Attach lists on plain applicable, classify by party.)  B. Opposed  4. Supported Elizabeth Ginsberg State Representative (Identify by name or, if applicable, classify by party.)  B. Opposed  4. Supported  CTIVITY  B. Opposed  5. Opposed  6. Opposed  6. Opposed  7. Measures (Describe by date and location and nature of issue.)  8. Opposed  8. Opposed  9. Opposed  1. Candidates (Identify by name or, if applicable, classify by party.)  8. Opposed  1. Candidates (Identify by name or, if applicable, classify by party.)  8. Opposed  9. Opposed  1. Candidates (Identify by name or, if applicable, classify by party.)

# FORM GPAC ADDENDUM

Page 12 of 35

						1 ago 12 01 00
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Stonewall Democrats of	Dallas PAC			00053855	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Aicha Davis State Representa	ative	
	(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	1. Candidates	A. Supported	Toni Rose State Representati	ve	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Tom room Clate Representati	••	
	(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	Yvonne Davis State Represer	ntative	
	(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.)				
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# FORM GPAC ADDENDUM

Page 13 of 35

				1 ago 10 01 00
12 COMMITTEE NA	ME			13 Filer ID (Ethics Commission Filers)
Stonewall Dem	ocrats of Dallas PAC			00053855
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.		Averie Bishop State Represent	tative
(Attach lists on pl paper to complete report if necessar	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	1. Candidates	A. Supported	Rep. Rhetta Andrews Bowers	State Representative
ACTIVITY	(Identify by name or, if applicable, classify by party.		-γ	
(Attach lists on place to complete report if necessar	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 ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.	A. Supported	Rep. John Bryant State Repres	sentative
(Attach lists on pl. paper to complete report if necessar	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.	)		
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# FORM GPAC ADDENDUM

Page 14 of 35

					1 490 1 1 01 00
12 COMMITTEE NA	ME			13 Filer ID	(Ethics Commission Filers)
Stonewall Dem	ocrats of Dallas PAC			00053855	
14 COMMITTEE	1. Candidates	A Supported	Casaandra Harmandar Ctata D		
ACTIVITY	(Identify by name or, if applicable, classify by party.		Cassandra Hernandez State R	epresentative	
(Attach lists on pl paper to complete report if necessar	e this	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.	)			
COMMITTEE	1. Candidates		Judge Staci Williams Court of A	Anneals Chief Tue	etico
ACTIVITY	(Identify by name or, if applicable, classify by party.		Judge Staci Williams Court of A	ppeais, offici dus	Suce
(Attach lists on pl paper to complete report if necessar	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 ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Judge Robbie Partida-Kipness	Court Of Appeals	s, Justice
(Attach lists on pl paper to complete report if necessar	e this	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 15 of 35

						1 ago 10 01 00
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Stonewall Democrats of	Dallas PAC			00053855	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Judge Erin Nowell Court Of App	l peals, 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	1. Candidates	A. Supported	Judge Tina Clinton Court Of App	peals, Justice	
	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 Amanda Reichek Court C	Of Appeals, Jus	tice
	(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	ı			

# FORM GPAC ADDENDUM

Page 16 of 35

COMMITTEE NAME				13 Filer ID	(Ethios Commission Filors)
				<b>10</b> 1 1101 110	(Ethics Commission Filers)
Stonewall Democrats of	Dallas PAC			00053855	
COMMITTEE ACTIVITY	Candidates  (Identify by name or, if		Judge Kim Cooks Court Of Appe		
(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	Judge Ken Molherg Court Of Ar	peals. Justice	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		caago romanaaag	podio, odolioo	
(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	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.)				
	ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)	Activity  Actach lists on plain paper to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  Actach lists on plain paper to complete this eport if necessary.)  2. Measures (Identify by name or, if applicable, classify by party.)  Actach lists on plain paper to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  COMMITTEE (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders (Identify by name or, if applicable, classify by party.)  3. Officeholders (Identify by name or, if applicable, classify by party.)	ACTIVITY Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  2. Measures (Describe by party.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Attach lists on plain super to complete this eport if necessary.)  2. Measures (Describe by date and location of election and nature of issue)  3. Officeholders (Describe by date and location of election and nature of issue)  4. Supported Judge Kim Cooks Court Of Appropriate (Describe by date and location of election and nature of issue)  3. Officeholders (Describe by date and location of election and nature of issue)  4. Supported (Describe by date and location of election and nature of issue)  5. Opposed (Describe by date and location of election and nature of issue)  6. Opposed (Describe by date and location of election and nature of issue)  7. Measures (Describe by date and location of election and nature of issue)  8. Opposed (Describe by date and location of election and nature of issue)  8. Opposed (Describe by date and location of election and nature of issue)  8. Opposed (Describe by date and location and nature of issue)  8. Opposed (Describe by date and location and nature of issue)  8. Opposed (Describe by date and location and nature of issue)  8. Opposed (Describe by date and location of election and nature of issue)  9. Opposed (Describe by date and location of election and nature of issue)  8. Opposed (Describe by date and location of election and nature of issue)  9. Opposed (Describe by date and location of election and nature of issue)  8. Opposed (Describe by date and location of election and nature of issue)  9. Opposed (Describe by date and location of election and nature of issue)  9. Opposed (Describe by date and location of election and nature of issue)  9. Opposed (Describe by date and location of election and nature of issue)  9. Opposed (Describe by date and location of election and nature of issue)	1. Candidates   2. Measures   2. Measures   3. Opposed   3. Opposed   4. Supported   3. Opposed   4. Supported   5. Opposed   5. Oppo

# FORM GPAC ADDENDUM

Page 17 of 35

						1 age 11 01 00
12 (	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
9	Stonewall Democrats of	Dallas PAC			00053855	
	COMMITTEE	Candidates (Identify by name or, if applicable, classify by party.)		Judge Eric Moyé District Judge		
p	Attach lists on plain paper to complete this eport 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 Monica Purdy District Jud	dae	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		oudge Monitour druy District out	<b>190</b>	
p	Attach lists on plain paper to complete this eport 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	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Kim Bailey District Judge		
p	Attach lists on plain aper to complete this eport 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.)				<del>-</del>
		•	•			

# FORM GPAC ADDENDUM

Page 18 of 35

					1 age 10 01 00
12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	Stonewall Democrats of	Dallas PAC			00053855
1/1	COMMITTEE	1. Candidates	A Supported	Judge Elizabeth Davis Frizell C	riminal District Court Judgo
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Judge Elizabeth Davis Frizeli C	milital District Court Judge
	(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		
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE	Candidates		Judge Audra Ladawn Riley Crir	minal District Court Judgo
	ACTIVITY	(Identify by name or, if	A. Supported	Judge Addra Ladawii Riley Cili	Illiai District Court Juage
		applicable, classify by party.)			
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		Measures     (Describe by date and	A. Supported		
		location of election and nature of issue.)			
			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 Dominique Collins Crimi	nal District Court Judge
	(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 19 of 35

COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Stonewall Democrats of	Dallas PAC			00053855
	Candidates (Identify by name or, if applicable, classify by party.)		John Ames County Tax Assess	or
paper to complete this		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.)			
	1. Candidates (Identify by name or, if applicable, classify by party.)		Theresa Marie Daniel Dallas Co	ounty Commissioner - Place 1
paper to complete this		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.)			
	Candidates     (Identify by name or, if applicable, classify by party.)		John Wiley Price Dallas County	Commissioner - Place 3
paper to complete this		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.)			
		Stonewall Democrats of Dallas PAC  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  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.)  2. Measures (Describe by date and location of election and nature of issue.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  2. Measures (Identify by name or, if applicable, classify by party.)  2. Measures (Identify by name or, if applicable, classify by party.)  3. Officeholders Assisted  3. Officeholders Assisted  3. Officeholders Assisted	Stonewall Democrats of Dallas PAC  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  COMMITTEE  ACTIVITY  2. Measures (Identify by name or, if applicable, classify by party.)  B. Opposed  COMMITTEE  ACTIVITY  2. Measures (Identify by name or, if applicable, classify by party.)  B. Opposed  COMMITTEE  ACTIVITY  A. Supported  In Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  COMMITTEE  A. Supported  A. Supported  A. Supported  Complete this report if necessary.)  B. Opposed  COMMITTEE  A. Supported  B. Opposed  COMMITTEE  A. Supported  Complete this report if necessary.)  B. Opposed	Stonewall Democrats of Dallas PAC  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  A. Supported  Describe by date and instruct of issue.)  3. Officeholders Assisted  (Identify by name or, if applicable, classify by party.)  (Attach lists on plain paper to complete this report if necessary.)  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted  COMMITTEE  ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted  Describe this report if necessary.)  Describe this report if necessary.)  A. Supported  Theresa Marie Daniel Dallas Complete this report if necessary.  B. Opposed  Describe thy date and location of describe and nature of issue.)  A. Supported  Describe thy date and location of describe and nature of issue.)  B. Opposed  Describe this report if necessary.  A. Supported  Describe thy date and location of describe and nature of issue.)  B. Opposed  Describe this report if necessary.  Describe thy date and location of describe and nature of issue.)  Describe this report if necessary.  Describe the report if n

## GENERAL-PURPOSE COMMITTEE REPORT:

# FORM GPAC ADDENDUM

	PURPOSE						Page 20 of 35
12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	Stonewall Democrats of	f Dallas PAC				00053855	
14	COMMITTEE ACTIVITY	Candidates  (Identify by name or, if applicable, classify by party.)	A. Supported	Marian Brown	Dallas County Sh	eriff	
	(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.)					

## **SUBTOTALS - GPAC**

# FORM **GPAC**COVER SHEET PG 3

			21 of	35					
17 COMMITTEE Stonewall D	E NAME Democrats of Dallas PAC	<b>18</b> Filer ID 00053855	(Ethics Commission Filers	5)					
	L9 SCHEDULE SUBTOTALS  NAME OF SCHEDULE								
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 2,40	00.00					
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$						
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$						
	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	)R	\$						
	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$						
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$						
	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	S	\$ 8,72	25.51					
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	\$						
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$						

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how to comp	lete this forr	n.	1	Total pages Schedule A1: Sch: 1/3 Rpt: 22/35		
2	FILER NAME Stonewall De	emocrats of Dallas PAC			3	Filer ID (Ethics Commission 00053855	ı Filers)	
4	Date 09/30/2024	Barfield, Mark	ate PAC (ID#:	)	7	Amount of Contribution (\$)	\$60.00	
_		Desoto, TX 75115	1-		_			
8	Principal occu Manager	pation / Job title (See Instructions)	9	Employer (See Instructions AT&T	5)			
	Date 10/17/2024	Barrios, Dan	ate PAC (ID#:	)		Amount of Contribution (\$)	\$35.00	
	Dringinal occu	Richardson, TX 75080  cupation / Job title (See Instructions)  Employer (See Instructions)			·/			
	Teacher/ City Councilman			Richardson ISD/ City of		chardson		
	Date Full name of contributor out-of-state PAC (II  10/18/2024 Campbell, Elaine  Contributor address; City; State; Zip Code			)		Amount of Contribution (\$)	\$35.00	
		Dallas, TX 75226						
	Principal occu Organizer	pation / Job title (See Instructions)		Employer (See Instructions Planned Parenthood	5)			
	Date Full name of contributor out-of-state PAC ( 10/18/2024 Daniels, Al			)	•	Amount of Contribution (\$)	\$35.00	
	Principal occu Contractor	Dallas, TX 75244 pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> s)			
	Date Full name of contributor out-of-state PAC (ID#:  10/03/2024 Graham, Sophia  Contributor address; City; State; Zip Code  Mesquite, TX 75181				Amount of Contribution (\$)	\$35.00		
	Principal occu Deputy Cons	pation / Job title (See Instructions)		Employer (See Instructions Tarrant County	5)			

	MONET	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 23/35		
2	FILER NAME Stonewall De	emocrats of Dallas PAC				3	Filer ID (Ethics Commission 00053855	Filers)	
4	Date 10/07/2024	<ul><li>5 Full name of contributor Lindsey, Zachary</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#: ate; Zip Code			7	Amount of Contribution (\$)	\$35.00	
		Dallas, TX 75219							
8	Principal occu Customer Su	pation / Job title (See Instructions uccess	9		Employer (See Instructions Stealth Monitoring	s)			
	Date 10/15/2024	Full name of contributor Little, Tiffany Contributor address; City; Si	out-of-state PAC (ID#: ate; Zip Code		)	•	Amount of Contribution (\$)	\$25.00	
	Dallas, TX 75224				Employer (See Instructions				
	Principal occupation / Job title (See Instructions) Reporting Specialist			City Electric Supply Company			any		
	Date 09/28/2024	Full name of contributor Lo Vuolo, Michael Contributor address; City; St			)		Amount of Contribution (\$)	\$10.00	
		Dallas, TX 75235							
	Principal occu Union Staff F	pation / Job title (See Instructions Rep	(i)		Employer (See Instructions CWA	5)			
	Date 10/15/2024	Full name of contributor Lum, Melissa  Contributor address; City; St  Coppell, TX 75019	out-of-state PAC (ID#: ate; Zip Code				Amount of Contribution (\$)	\$35.00	
	Principal occu Analyst	pation / Job title (See Instructions	)		Employer (See Instructions Fidelity	5)			
	Date 10/11/2024	Full name of contributor O'Neal, Keith Michael Contributor address; City; St Dallas, TX 75235	out-of-state PAC (ID#:		)	•	Amount of Contribution (\$)	\$25.00	
	Principal occu Assistant Tre	pation / Job title (See Instructions easurer	)		Employer (See Instructions Hunt Consolidated Inc	5)			
		· · ·							

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUL	DULE A1	
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/3 Rpt: 24/35	
2	FILER NAME Stonewall De	emocrats of Dallas PAC		3	Filer ID (Ethics Commission 00053855	n Filers)
4	Date 10/03/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$35.00
0	Dringing occur	Dallas, TX 75219 incipal occupation / Job title (See Instructions)  9 Employer (See Instruction				
8	Business An		JP Morgan Chase	)		
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$1,000.00
	Dringing agg	San Antonio, TX 78205	Employer (See Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID: 10/11/2024 Torres Williams, Dominque Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$35.00
		Dallas, TX 75249				
	Principal occu Judge	pation / Job title (See Instructions)	Employer (See Instructions Dallas County	)		
	Date 09/28/2024	Full name of contributor out-of-state PAC (ID#:_ Turicchi Jr, Thomas Contributor address; City; State; Zip Code  Dallas, TX 75206			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	_
Sch: 1/11 Rpt: 25/35	Stonewall Democrats of Dallas PAC 00053855	
4 Date	5 Payee name	
10/01/2024	American National Bank of Texas	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$192.20	2703 Oak Lawn Ave	
Expenditure from corporate funds	Dallas, TX 75219	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Bank fees.	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
5 .		_
Date	Payee name	
10/02/2024	Authorize.Net	
Amount (\$)	Payee address; City; State; Zip Code	
\$50.35	808 E Utah Valley	
- Evanaditura from		
Expenditure from corporate funds	American Fork , UT 84003	
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.	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Software platform fees.	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	n	
Date	Payee name	
10/15/2024	Averie For All Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	819 W Arapaho Road STE 24B	
·		
Expenditure from corporate funds	Richardson, TX 75080	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By	
EXPENDITORE	Candidate/Officeholder/Political Committee	
	Contribution to campaign.	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	<b>,</b>	

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
orodic odra i dymoni	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/11 Rpt: 26/35	Stonewall Democrats of Dallas PAC 00053855
4 Date	5 Payee name
10/15/2024	Cassandra Hernandez for Texas Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$250.00	P.O. Box 1289
Expenditure from corporate funds	Addison, TX 75001
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Contribution to campiagn.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/18/2024	DaSean for Texas Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	2450 Louisiana Street Suite 400, Box 506
Expenditure from corporate funds	Houston, TX 77006
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Contribution to campaign.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/15/2024	Elizabeth Ginsberg Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	4502 W. Lovers Lane
- Formanditure Cons	
Expenditure from corporate funds	Dallas, TX 75209
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
Di Libilone	Candidate/Officeholder/Political Committee
	Contribution to campaign.
Complete CAU V if direct	Condidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

## SCHEDULE F1

Advertising Expense Ev Accounting/Banking Fe Consulting Expense Fo Contributions/ Donations Made By - Gif

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/11 Rpt: 27/35	Stonewall Democrats of Dallas PAC 00053855
4 Date	5 Payee name
10/15/2024	George King Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$250.00	P.O. Box 411
Expenditure from corporate funds	Addison, TX 75001
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
_/	Candidate/Officeholder/Political Committee
	Contribution to campaign.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>	
Date	Payee name
10/01/2024	Google
Amount (\$)	Payee address; City; State; Zip Code
\$161.18	1600 Amphitheatre Pkwy
Expenditure from corporate funds	Mountain View, CA 94043
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  Monthly G-Suite subscription fees.
	Monthly & Suite Subscription rees.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/18/2024	Holly Taylor Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	PO Box 1748
Expenditure from	
corporate funds	Austin, TX 78767
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
Z/LIBITORE	Candidate/Officeholder/Political Committee
	Contribution to campaign.
Complete ONU V. V. V.	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

## SCHEDULE F1

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

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/11 Rpt: 28/35	Stonewall Democrats of Dallas PAC 00053855
4 Date	5 Payee name
10/25/2024	Hubspot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$44.78	2 Canal Park
Expenditure from	
corporate funds	Cambridge, MA 02141
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  Payment processing fees.
	ayment processing rees.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Power name
10/04/2024	Payee name
	Hunky's Old Fashioned Hamburgers
Amount (\$)	Payee address; City; State; Zip Code
\$71.00	3930 Cedar Springs Rd
Expenditure from	
corporate funds	Dallas, TX 75219
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Expenses related to "Wine Walk" event food.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
<u> </u>	
Date	Payee name
10/15/2024	John Bryant Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	P.O. Box 140977
Expenditure from	
corporate funds	Dallas, TX 75214
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Contribution to campaign.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Candidate/Officeholder/Politica	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/11 Rpt: 29/35	Stonewall Democrats of Dallas PAC 00053855
4 Date	5 Payee name
10/18/2024	Judge Eric V. Moyé Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$250.00	2121 N. Pearl St., Ste. 210, Mail Box No. 1
Expenditure from corporate funds	Dallas, TX 75201
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution to campaign.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/01	<u> </u>
Date	Payee name
10/18/2024	Judge Nancy Mulder Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	13901 Midway Rd. #102 PMB 498
— Forestitus from	
Expenditure from corporate funds	Dallas, TX 75244
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Contribution to campaign.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
<u> </u>	
Date	Payee name
10/18/2024	Judge Staci Williams Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	P.O. Box 225321
Expenditure from	
corporate funds	Dallas, TX 75222
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Candidate/Officeriolder/Political Committee Contribution to campaign.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

## SCHEDULE F1

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

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/11 Rpt: 30/35	Stonewall Democrats of Dallas PAC 00053855
4 Date	5 Payee name
10/18/2024	Judge Tina Clinton Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$250.00	Post Office Box 836583
Expenditure from corporate funds	Richardson, TX 75083
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution to campaign.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H
Date	Payee name
10/21/2024	Judge Tonya Parker Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	P.O. Box 225031
— Formanditure from	
Expenditure from corporate funds	Dallas, TX 75222
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LA LABITORL	Candidate/Officeholder/Political Committee
	Contribution to campaign.
0 1: 01:17:	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/15/2024	Justice Amanda Reichek Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	Post Office Box 180551
- Forest divine Cons	
Expenditure from corporate funds	Dallas, TX 75081
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EVENDIIOKE	Candidate/Officeholder/Political Committee
	Contribution to campaign.
0 1: 0:::::::::::::::::::::::::::::::::	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
SAPORALEIO TO BOHOIL O/OI	

## 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)

	Credit Card Payment	The Instruction Guide explains how to complete	e this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 7/11 Rpt: 31/35	Stonewall Democrats of Dallas PAC	00053855
4	Date	5 Payee name	•
	10/18/2024	Justice Bonnie Lee Goldstein Campaign	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$250.00	2121 N. Pearl St., Ste. 210, Mail Box No. 1	
_	T Expenditure from		
L	corporate funds	Dallas, TX 75201	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee [	Check if Austin, TX, officeholder living expense  Contribution to campaign.
			oonaaaan to oampaag
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	Н	
	Date	Payee name	
	10/15/2024	Justice Erin Nowell Campaign	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	P.O. Box 381431	
	Expenditure from corporate funds	Duncanville, TX 75138	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) [	Description
	OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE	Candidate/Officeholder/Political Committee	Contribution to compaign
			Contribution to campaign.
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	10/18/2024	Justice Ken Molberg Campaign	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	2201 Main Street, Suite 820	
	Expenditure from corporate funds	Dallas, TX 75201	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) [	Description
	OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense  Contribution to campaign.
		'	σοπιπουμότη το σαπιραίχητι
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

## SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense

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

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

Candidate/Officeholder/Politica	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/11 Rpt: 32/35	Stonewall Democrats of Dallas PAC 00053855
4 Date	5 Payee name
10/15/2024	Justice Robbie Partida-Kipness Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$250.00	6060 N. Central Expy., Ste. 500
Expenditure from	
corporate funds	Dallas, TX 75206
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee Contribution to campaign.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>1</del>
Date	Payee name
10/18/2024	Kim Bailey Phipps Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	P.O. Box 670213
— Forestitus from	
Expenditure from corporate funds	Dallas, TX 75367
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee Contribution to campaign.
	Contribution to campaign.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/03/2024	LIFE STORAGE
Amount (\$)	Payee address; City; State; Zip Code
\$105.40	4640 Harry Hines
Expenditure from corporate funds	Dallas, TX 75235
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
LA LABITORE	Check if Austin, TX, officeholder living expense  Monthly storage unit rental expense.
	Monthly Storage unit rental expense.
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Forms provided by Tayas F	thics Commission www.athics state ty us Version V/A 1 0 /18da51

## SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Opnations Made By
Condidate/Officeholde/(Jolitice

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a extraory not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 9/11 Rpt: 33/35	2 FILER NAME Stonewall Democrats of Dallas PAC 3 Filer ID (Ethics Commission Filers) 00053855
4 Date	5 Payee name
10/15/2024	Mihaela Plesa Campaign
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code P.O. Box 796311
\$300.00	F.O. BOX 790311
Expenditure from corporate funds	Dallas, TX 75248
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Contribution to campaign.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/15/2024	Rayna Glasser Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	PO Box 10741
Expenditure from corporate funds	Fort Worth, TX 76114
PURPOSE	To a
OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Contribution to campaign.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/15/2024	Rhetta Andrews Bowers Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	3526 Lakeview Parkway Ste. B #211
Expenditure from corporate funds	Rowlett, TX 75088
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Contribution to campaign.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

## SCHEDULE F1

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

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

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

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

Candidate/Officeholder/Politica		
Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 10/11 Rpt: 34/35	Stonewall Democrats of Dallas PAC 00053855	
4 Date	5 Payee name	
10/15/2024	Stephanie Draper for Texas State Senate Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$500.00	539 W. Commerce Street, Suite 4187	
— Foresedit ve from		
Expenditure from corporate funds	Dallas, TX 75208	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF EXPENDITURE	Contributions/Donations Made By	
	Candidate/Officeholder/Political Committee Contribution to campaign.	
	Contribution to campaign.	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
Date	Davisa sama	=
10/15/2024	Payee name Terry Meza Campaign	
		_
Amount (\$)	Payee address; City; State; Zip Code PO Box 155076	
\$500.00	PO B0X 155076	
Expenditure from		
corporate funds	Irving, TX 75015	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Contribution to campaign.	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	1	
Date	Payee name	=
10/21/2024	Theresa Daniel Campaign	
Amount (\$)	Payee address; City; State; Zip Code	-
\$250.00	PO Box 181444	
Expenditure from corporate funds	Dallas, TX 75218	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	-
OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Candidate/Officeholder/Political Committee	
	Contribution to campaign.	
0 1: 0:::::::::::::::::::::::::::::::::		_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
,		4

## 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (or processes and installation)

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: 11/11 Rpt: 35/35	Stonewall Democrats of Dallas PAC 00053855
4 Date	5 Payee name
10/21/2024	United States Postal Service
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$256.00	2825 Oak Lawn Ave
Expenditure from corporate funds	Dallas, TX 75219
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
	Yearly fee for renting PO box at post office.
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/07/2024	Zoom
Amount (\$)	Payee address; City; State; Zip Code
\$94.60	55 Almaden Blvd.
Expenditure from corporate funds	San Jose, CA 95113
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Monthly Zoom subscription fees.
	Wionany 20011 Subscription 1663.
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	