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) 00088744 3 COMMITTEE NAME **OFFICE USE ONLY** Central Texas Democrats PAC Date Received **ELECTRONICALLY FILED** 10/28/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1150 N. Loop 1604 West Date Hand-delivered or Date Postmarked Ste. 108-230 Change of Address San Antonio, TX 78248 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Christopher NAME NICKNAME LAST **SUFFIX** Koob STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1150 N. Loop 1604 West STREET **ADDRESS** Ste. 108-230 (Residence or Business) San Antonio, TX 78248 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1150 N. Loop 1604 West MAILING **ADDRESS** Ste. 108-230 San Antonio, TX 78248 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (202) 552-0221 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** 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)
Central Texas Democrats PAC			00088744	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported B. Opposed		
		Б. Орросси		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS Macheck here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	IL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	6,250.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	228,108.94
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	17,142.07
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			·	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Christop	her Koob	
		Signature of Car	mpaign Treasu	ırer
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
		, th	nis 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	cer administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

	3 of 18					
17 COMMITTEE NAME Central Texas Democrats PAC 18 Filer ID (Ethics Commission Filers) 00088744						
19 SCHEDULE SUNAME OF SCH		SUBTOTAL AMOUNT				
1. SC	CHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$			
2. SC	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3. SC	CHEDULE B: PLEDGED CONTRIBUTIONS		\$			
1 / 1/1	CHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO RGANIZATION	R	\$ 6,250.00			
	CHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA ABOR ORGANIZATION	ATION OR	\$			
6. SC	CHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$			
	CHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR RGANIZATION		\$			
8. S	CHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$			
9. SC	CHEDULE E: LOANS		\$			
10. X SC	CHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 228,108.94			
11. SC	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
12. SC	CHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
13. SC	CHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
14. SC	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$			
	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR FILER	RETURNED	\$ 368.06			

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

	The Instruction Guide explains how to complete this form.			1	1 Total pages Schedule C1: Sch: 1/1 Rpt: 4/18		
2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
Central Texas Democrats PAC			00088744				
4	Date	5	Corporation / Labor Organization name	7	Amount of contribution (\$)		
	09/30/2024		Texas Majority		\$6,250.00		
		6	Corporation / Labor Organization address; City; State; Zip Code				
			Washington, DC 20003				

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/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 this form.
1 Total pages Schedule F1: Sch: 1/13 Rpt: 5/18	2 FILER NAME Central Texas Democrats PAC 3 Filer ID (Ethics Commission Filers) 00088744
4 Date 09/30/2024	5 Payee name Cavanagh, Brendan
6 Amount (\$) \$2,548.98 Expenditure from corporate funds 8 PURPOSE OF EXPENDITURE	7 Payee address; City; State; Zip Code 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Staff Salaries
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 10/15/2024	Payee name Cavanagh, Brendan
Amount (\$) \$2,548.98 Expenditure from corporate funds PURPOSE	Payee address; City; State; Zip Code 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248 (a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Staff Salaries
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 09/30/2024	Payee name Dickison, Madison
Amount (\$) \$1,892.53 Expenditure from corporate funds	Payee address; City; State; Zip Code 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Staff Salaries
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	ense Pri Sa	_	ense Jes/Contract Labor	Travel in District Travel Out of Di OTHER (enter a	
1 Total pages Schedule F1:	2 FILER NAME					3 Filer ID	(Ethics Commission Filers)
Sch: 2/13 Rpt: 6/18		as Democrats PAC	:			00088744	,
4 Date	5 Payee name						
10/15/2024	Dickison, M	adison					
6 Amount (\$)	7 Payee addre	ss; City;	State; Z	ip Code	<u> </u>		
\$2,063.40	1150 N. Loo	p 1604 West					
	Ste 108-230)					
Expenditure from corporate funds		o, TX 78248					
8 PURPOSE	(a) Category (Se	ee Categories listed at the top	p of this schedule	e) (b) Description		
OF EXPENDITURE		ges/Contract Labo				outside of Texas. Con	
EXI ENDITORE					_	n, TX, officeholder livin	g expense
					Campaign St	tan Salaries	
9 Complete ONLY if direct expenditure to benefit C/OH		ceholder name	Offic	e sough	it	Office h	eld
Date	Payee name						
10/04/2024	GDA Wins						
Amount (\$)	Payee addre	ss; City;	State; Z	in Code	<u> </u>		
\$10,751.94	· ·	ecticut Ave NW					
Ψ10,701.04	Ste 11813	oudat / We TVV					
Expenditure from		5.0.000					
corporate funds	Washington	, DC 20008					
PURPOSE OF	(a) Category (Se	ee Categories listed at the top	p of this schedule	e) (b	Description		
EXPENDITURE	Printing Exp	ense			=	outside of Texas. Con	
					Printing	n, TX, officeholder living	y expense
					Tilling		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name	Offic	ce sough	it	Office h	eld
Date	Payee name						
10/04/2024	GDA Wins						
	Payee addre	City	Ctata: 7	in Code			
Amount (\$)	l	ss; City; ecticut Ave NW	State; Z	ip Code	;		
\$10,751.94		ecticut Ave IVV					
Expenditure from	Ste 11813						
corporate funds	Washingtor	, DC 20008					
PURPOSE	(a) Category (Se	ee Categories listed at the top	p of this schedule	e) (b) Description		
OF EXPENDITURE	Printing Exp	ense			=	outside of Texas. Con	
					ш	n, TX, officeholder living	g expense
					Printing		
Operation Children			0.00			0" '	-1-1
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		ceholder name	Offic	e sough	ΙŢ	Office h	eia
3.4.2							

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/13 Rpt: 7/18	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
10/02/2024	Google
6 Amount (\$) \$153.50	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Software Subscription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software Subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
Date	Payee name
09/30/2024	Hinojosa, Cynthia
Amount (\$)	Payee address; City; State; Zip Code
\$721.83	1150 N. Loop 1604 West
Expenditure from corporate funds	Ste 108-230 San Antonio, TX 78248
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
Date	Payee name
10/15/2024	Hinojosa, Cynthia
Amount (\$)	Payee address; City; State; Zip Code
\$721.83	1150 N. Loop 1604 West
Expenditure from	Ste 108-230
corporate funds	San Antonio, TX 78248
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
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: 4/13 Rpt: 8/18	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
09/30/2024	Ibarra, Lesiy
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,892.53	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Campaign Staff Salaries
	Campaigh Stail Salahes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/15/2024	Ibarra, Lesly
Amount (\$)	Payee address; City; State; Zip Code
\$2,063.40	1150 N. Loop 1604 West
Expenditure from	Ste 108-230
corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
One was late ONII Wife disease	Open Highest (Office health an arrange of the second to th
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/30/2024	Johnson, Joseph
Amount (\$)	Payee address; City; State; Zip Code
\$578.22	1150 N. Loop 1604 West
- Formanditure Cons	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Commission ONUVIVIII	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
p = 1 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

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

Candidate/Officeholder/Politica Credit Card Payment	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: 5/13 Rpt: 9/18	Central Texas Democrats PAC 00088744	
4 Date	5 Payee name	
10/04/2024	Longhorn Organizing Strategies	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$175,000.00	3120 Southwest Fwy	
Evponditure from	Ste 101 PMB 693824	
Expenditure from corporate funds	Houston, TX 77098	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Field Consulting	
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held	
experience to benefit or or		_
Date	Payee name	
10/15/2024	Lowe's	
Amount (\$)	Payee address; City; State; Zip Code	
\$6.37	1000 Lowes Blvd	
Expenditure from corporate funds	Mooresville, NC 28117	
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	
	Office Supplies	
	Cinido Cappinos	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI	1	
Date	Payee name	
10/02/2024	MBA Consulting Group	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,500.00	611 Pennsylvania Ave SE	
	# 143	
X Expenditure from corporate funds	Washington, DC 20003	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
EAFEINDITURE	Check if Austin, TX, officeholder living expense	
	Compliance Services	
Complete ONLY If allow	Condidate/Officeholder name	_
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
,		_

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) 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	Il 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: 6/13 Rpt: 10/18	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
09/27/2024	Office Depot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15.63	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Office Supplies
	Office Supplies
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
Data	Para a same
Date	Payee name
10/02/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$184.03	6600 N Military Trl
Expenditure from	
corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
-	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
D-1-	
Date	Payee name
10/04/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$184.03	6600 N Military Trl
Expenditure from	
corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/13 Rpt: 11/18	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
10/04/2024	Office Depot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$184.03	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
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
	Office Supplies
	Cinic Supplies
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/07/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$11.91	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Office Supplies
	Office Supplies
Operation ONE Wife discont	On alidate (Office helder game)
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u>'</u>	
Date	Payee name
10/07/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$65.79	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiditure to benefit C/Oi	1

SCHEDULE F1

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/13 Rpt: 12/18	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
10/15/2024	Office Depot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$40.05	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense Office Supplies
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
10/15/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$65.79	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense Office Supplies
	Office Supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
10/15/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$15.16	6600 N Military Trl
Expenditure from	
corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Office Supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
3.,50	

SCHEDULE F1

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/13 Rpt: 13/18	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
10/15/2024	Office Depot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$40.05	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Office Supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
ехрениците то репент С/ОГ	1
Date	Payee name
10/17/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$90.91	6600 N Military Trl
Expenditure from corporate funds	Boca Raton, FL 33487
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 Office Supplies
	Office Supplies
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/17/2024	Office Depot
Amount (\$)	Payee address; City; State; Zip Code
\$36.81	6600 N Military Trl
400.01	
Expenditure from corporate funds	Boca Raton, FL 33487
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Office Supplies
Commission Chill V III alia	Condidate/Officeholder name Office county
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
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

nt Solicitation/Fundraising Expense
e 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 con	nplete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 10/13 Rpt: 14/18	Central Texas Democrats PAC	00088744	
4 Date	5 Payee name	•	
09/30/2024	Payroll Data Processing		
6 Amount (\$)	7 Payee address; City; State; Zip Coo	de	
\$3,209.86	4224 Henderson Blvd		
- "			
Expenditure from corporate funds	Tampa, FL 33629		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Payroll Taxes	
9 Complete ONLY if direct	Candidate/Officeholder name Office souc	tht Office held	
expenditure to benefit C/OI			
Date	Payee name		
09/30/2024	Payroll Data Processing		
Amount (\$)	Payee address; City; State; Zip Coo	10	
\$58.73	4224 Henderson Blvd	uc	
Ψ30.73	4224 Henderson blvd		
Expenditure from corporate funds	Tampa, FL 33629		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Payroll Fee	
Complete ONLY if direct	Candidate/Officeholder name Office sour	tht Office held	
expenditure to benefit C/OI		•	
Date	Payee name		
10/15/2024	Payroll Data Processing		
Amount (\$)	Payee address; City; State; Zip Coo	de	
\$3,234.41	4224 Henderson Blvd		
Ψ0,204.41	4224 Fichadison Biva		
Expenditure from corporate funds	Tampa, FL 33629		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Payroll Taxes	
		i ayron ranco	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office soug	tht Office held	
expenditure to benefit C/OI	~	Jine Held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 11/13 Rpt: 15/18	Central Texas Democrats PAC 00088744		
4 Date	5 Payee name		
10/15/2024	Payroll Data Processing		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$70.98	4224 Henderson Blvd		
Expenditure from corporate funds	Tampa, FL 33629		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense Payroll Fee		
	rayioli ree		
O O consider ONE V if discret	One distributed (Office health		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
<u> </u>			
Date	Payee name		
10/08/2024	Stamps.com		
Amount (\$)	Payee address; City; State; Zip Code		
\$40.00	4301 Bull Creek Rd		
Expenditure from corporate funds	Austin, TX 78731		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense		
	Postage		
Commission ONII V if dispose	Candidate/Officeholder name Office sought Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI			
Date	Payee name		
10/08/2024	Stamps.com		
Amount (\$)	Payee address; City; State; Zip Code		
\$77.83	4301 Bull Creek Rd		
Expenditure from corporate funds	Austin, TX 78731		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Postage		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OH			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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

	The instruction dutice explains now to complete this form:	
1 Total pages Schedule F1:		Filer ID (Ethics Commission Filers)
Sch: 12/13 Rpt: 16/18	Central Texas Democrats PAC	00088744
4 Date	5 Payee name	
10/15/2024	USPS	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,908.22	475 L'Enfant Plaza SW	
Expenditure from corporate funds	Washington, DC 20260	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Solicitation, analasing Expense	le of Texas. Complete Schedule T. officeholder living expense
	Postage	onicentiaes aving expense
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
Date	Payee name	
10/16/2024	USPS	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,062.88	475 L'Enfant Plaza SW	
Ψ1,002.00	470 E Email Fraza GW	
Expenditure from corporate funds	Washington, DC 20260	
PURPOSE OF EXPENDITURE	Solicitation/1 undivising Expense	le of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX,	officeholder living expense
EXPENDITORE	Postage	officeholder living expense
Complete ONLY if direct expenditure to benefit C/Ol	Postage Candidate/Officeholder name Office sought	officeholder living expense Office held
Complete <u>ONLY</u> if direct	Postage Candidate/Officeholder name Office sought	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought OH	
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Payee name	
Complete ONLY if direct expenditure to benefit C/Ol Date 10/16/2024	Candidate/Officeholder name Office sought Payee name USPS Payee address; City; State; Zip Code	
Complete ONLY if direct expenditure to benefit C/Ol Date 10/16/2024 Amount (\$)	Candidate/Officeholder name Office sought Payee name USPS Payee address; City; State; Zip Code	
Complete ONLY if direct expenditure to benefit C/Ol Date 10/16/2024 Amount (\$) \$1,086.24 Expenditure from corporate funds PURPOSE	Candidate/Officeholder name Office sought Payee name USPS Payee address; City; State; Zip Code 475 L'Enfant Plaza SW	
Complete ONLY if direct expenditure to benefit C/Ol Date 10/16/2024 Amount (\$) \$1,086.24 Expenditure from corporate funds	Candidate/Officeholder name Office sought Payee name USPS Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260 (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Office held
Complete ONLY if direct expenditure to benefit C/Ol Date 10/16/2024 Amount (\$) \$1,086.24 Expenditure from corporate funds PURPOSE OF	Candidate/Officeholder name Office sought Payee name USPS Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260 (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Check if travel outside	Office held
Complete ONLY if direct expenditure to benefit C/Ol Date 10/16/2024 Amount (\$) \$1,086.24 Expenditure from corporate funds PURPOSE OF	Candidate/Officeholder name Office sought Payee name USPS Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260 (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Office held
Complete ONLY if direct expenditure to benefit C/Ol Date 10/16/2024 Amount (\$) \$1,086.24 Expenditure from corporate funds PURPOSE OF EXPENDITURE	Candidate/Officeholder name Office sought Payee name USPS Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260 (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside Check if Austin, TX, Postage	Office held
Complete ONLY if direct expenditure to benefit C/Ol Date 10/16/2024 Amount (\$) \$1,086.24 Expenditure from corporate funds PURPOSE OF	Candidate/Officeholder name Office sought Payee name USPS Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260 (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Candidate/Officeholder name Office sought	Office held le of Texas. Complete Schedule T. officeholder living expense
Complete ONLY if direct expenditure to benefit C/Ol Date 10/16/2024 Amount (\$) \$1,086.24 Expenditure from corporate funds PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Office sought Payee name USPS Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260 (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Candidate/Officeholder name Office sought	Office held le of Texas. Complete Schedule T. officeholder living expense
Complete ONLY if direct expenditure to benefit C/Ol Date 10/16/2024 Amount (\$) \$1,086.24 Expenditure from corporate funds PURPOSE OF EXPENDITURE Complete ONLY if direct	Candidate/Officeholder name Office sought Payee name USPS Payee address; City; State; Zip Code 475 L'Enfant Plaza SW Washington, DC 20260 (a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense Candidate/Officeholder name Office sought	Office held le of Texas. Complete Schedule T. officeholder living expense

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 (order a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:			
Sch: 13/13 Rpt: 17/18	Central Texas Democrats PAC 00088744		
4 Date	5 Payee name		
10/17/2024	USPS		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$146.00	475 L'Enfant Plaza SW		
Expenditure from corporate funds	Washington, DC 20260		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Postage		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/Ol			
Date	Payee name		
10/21/2024	USPS		
Amount (\$)	Payee address; City; State; Zip Code		
\$259.15	475 L'Enfant Plaza SW		
Expenditure from corporate funds	Washington, DC 20260		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Postage		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/O	1		
Date	Payee name		
10/17/2024	USPS		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,825.00	475 L'Enfant Plaza SW		
Ψ1,023.00	473 E Elliant I laza SW		
Expenditure from	West Service Bo 20000		
corporate funds	Washington, DC 20260		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense Postage		
	1 Ostage		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI			
·			

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 18/18 2 FILER NAME Filer ID (Ethics Commission Filers) Central Texas Democrats PAC 00088744 8 Amount (\$) Date 5 Name of person from whom amount is received 10/08/2024 Office Depot \$184.03 6 Address of person from whom amount is received; City; State; Zip Code Boca Raton, FL 33487 Purpose for which amount is received Check if political contribution returned to filer Refund from Vendor Amount (\$) Date Name of person from whom amount is received 10/08/2024 Office Depot \$184.03 Address of person from whom amount is received; City; State; Zip Code Boca Raton, FL 33487 Purpose for which amount is received Check if political contribution returned to filer Refund from Vendor