CORRECTION/AMENDMENT AFFIDAVIT FORM COR-PAC FOR POLITICAL COMMITTEE Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00065537 Date Received COMMITTEE 3 Hill Country Texas Democratic Women **ELECTRONICALLY FILED** NAME 10/26/2024 TREASURER Smith, David M. (Mr.) NAME Date Hand-delivered or Date Postmarked **ORIGINAL** January 15 Runoff REPORT TYPE Receipt # Amount July 15 10th day after campaign treasurer resignation Dissolution report 30th day before election Date Processed 8th day before election Other (specify) ORIGINAL PERIOD Month Year Year Day Month Day Date Imaged **COVERED THROUGH** 07/01/2024 09/26/2024 **EXPLANATION OF CORRECTION** In the course of preparing the 8-day report, examination of September 21, 2024 silent auction records showed that two contributors exceeded the itemization threshold when considering the aggregate value of their in-kind and monetary contributions during the reporting period. Contributions from these two individuals are shown in the amended report. Also, the total value of in-kind contributions in the period (all associated the September 21 event) had been overstated. A revised, lower total amount is in the amended report. Total monetary contributions, expenditures and contributions maintained on the last day of the reporting period are unchanged in this amended report. We respectfully request a waiver of any penalties that may be associated with amending the report. 8 AFFIDAVIT I swear, or affirm, under penalty of perjury, that this corrected report is true and correct. Check the box next to any and all applicable statements: Semiannual reports: I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report. Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. Mr. David M. Smith Signature of Campaign Treasurer AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said ____, this the _____ _____, 20____, to certify which, witness my hand and seal of office. Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

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) 00065537 3 COMMITTEE NAME **OFFICE USE ONLY** Hill Country Texas Democratic Women Date Received **ELECTRONICALLY FILED** 10/26/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 293014 Date Hand-delivered or Date Postmarked Change of Address Kerrville, TX 78029-3014 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. David M. NAME NICKNAME LAST **SUFFIX** Smith STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 101 E. Park Blvd., Ste. 600 STREET **ADDRESS** (Residence or Business) Plano, TX 75074 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 101 E. Park Blvd., Ste. 600 MAILING **ADDRESS** Plano, TX 75074 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (972) 516-3849 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) X **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2024 09/26/2024 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)
Hill Country Texas Dem	nocratic Women		00065537	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Judge Chika Anyiam Court Of	f Criminal Appe	eals, 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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M x check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	6,805.50
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,513.50
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	241.62
	4. TOTAL POLITICA	L EXPENDITURES	\$	5,429.62
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	6,167.39
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Davi	d M. Smith	
		Signature of Ca	ımpaign Treasur	er
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, ti	his the	day
		which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of office	er administering oath

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 4 of 15

					1 ago 1 01 20
12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Hill Country Texas Democratic Women					00065537
14	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Judge Cynthia Chapa Court Of Appeals, Justice		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
			B. Opposed		
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE	1. Candidates	A. Supported	Judge Luz Elena Chapa Court (Of Appeals, 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 Bonnie Goldstein Suprer	ne Court Justice
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
			B. Opposed		
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
		1 , , , , , , , , , , , , , , , , ,	l		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

Page 5 of 15

					1 ago o o 1 10	
12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)	
	Hill Country Texas Dem	ocratic Women			00065537	
14	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		oported Judge Nancy Mulder Court Of 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.)				
	COMMITTEE	1. Candidates	A. Supported	Judge Liza Rodriguez Court Of	Appeals, 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	Holly Taylor Court Of Criminal A	Appeals, Judge	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

GENERAL-PURPOSE COMMITTEE REPORT:

FORM GPAC ADDENDUM

PURPUSE					Page 6 of 15
2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Hill Country Texas Den	nocratic Women			00065537	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		e Christine Weems	Supreme Court Justic	е
(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

					7 of 15
17 CO	MMITTE	EE NAME	18 Filer ID	(Ethics Commi	ssion Filers)
Hil	l Count	ry Texas Democratic Women	00065537	·	ŕ
l .	HEDULI	SUBTOTA	AL AMOUNT		
NA	ME OF				
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	5,189.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	2,324.50
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	2,229.62
11.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	3,200.00
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 8/15	
2	FILER NAME Hill Country Texas Democratic Women			3	Filer ID (Ethics Commission 00065537	n Filers)
4	Date 09/03/2024 5 Full name of contributor out-of-state PAC (ID#:) Collazo, Veronica 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$22.00	
	<u> </u>	Tarpley, TX 78883-0117	0.5.1.00.1.00	Ĺ		
8	Principal occu retired	pation / Job title (See Instructions)	9 Employer (See Instructions none	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/21/2024 Collazo, Veronica Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$135.00	
		Tarpley, TX 78883-0117	- (2 Instruction	<u> </u>		
	retired	ipation / Job title (See Instructions)	Employer (See Instructions none	S)		
	Date 08/26/2024	Full name of contributor out-of-state PAC (ID#: Ostos, Sylvia B Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$88.00
	Principal occu	Kerrville, TX 78028 upation / Job title (See Instructions)	Employer (See Instructions	 s)		
	retired		none			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	action Guide explains how to complete this f	form.	1	Total pages Sch Sch: 1/1 Rpt:	
2 FILER NAME		3	Filer ID (Ethic	s Commission Filers)	
Hill Country	Texas Democratic Women		00065537		
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		1,861.50
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8	Amount of	9 In-kind contribution
09/21/2024	Collazo, Veronica			contribution (\$)	1
	7 Contributor address; City; State; Zip Code				necklaces for Sep 21 Silent auction
					į
	Tarpley, TX 78883-0117			Check if travel of	I outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JL	JDICIAL) (See ii	nstructions)
retired		none			
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FC	OR JUDICIAL)	(See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's	spouse (if any) (FOR JUDICIAL)
	,				,
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	<u> </u>			
			_		I
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of contribution (\$)	In-kind contribution description
09/21/2024					necklace for Sep 21 silent
	Contributor address; City; State; Zip Code				auction
					!
	1/ 'II - TV 70000			_	
	Kerrville, TX 78028	T ====	L		outside of Texas. Complete Schedule T.
	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JL	JDICIAL) (See II	nstructions)
retired		none			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FC	OR JUDICIAL)	(See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's	spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of	In-kind contribution
09/21/2024	<u> </u>			contribution (\$)	
	Contributor address; City; State; Zip Code			\$13.00	pastries for Sep 21 event
					i I
					!
	Kerrville, TX 78028			Check if travel of	l butside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JL		nstructions)
retired	,	none		,	
	principal occupation (FOR JUDICIAL)	Contributor's job title	(FC	OR JUDICIAL)	(See instructions)
	p		(,	,
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	nr's	snouse (if any) (FOR JUDICIAL)
Continuators	omposonian initi (i on dobioine)	Law iiiii oi continuut), J	spouse (ii aiiy) (. ON OUDIOINE)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1			
ii contributor	is a ciniu, iaw iiiiii oi paleiii(s) (ii aiiy) (FOR JUDICIAL)				
I					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political 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 Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 1/2 Rpt: 10/15	2 FILER NAME Hill Country Texas Democratic Women 3 Filer ID (Ethics Commission Filers) 00065537
4 Date	5 Payee name
07/30/2024	Doyle Community Center
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$20.00	110 W. Barnett Street
Expenditure from	Kerrville, TX 78028
corporate funds	Kettville, 1A 70020
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	board meeting conference room rental
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/27/2024	Doyle Community Center
Amount (\$)	Payee address; City; State; Zip Code
\$20.00	110 W. Barnett Street
Expenditure from corporate funds	Kerrville, TX 78028
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	board meeting conference room rental
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/21/2024	Doyle Community Center
Amount (\$)	Payee address; City; State; Zip Code
\$380.00	110 W. Barnett Street
Expenditure from corporate funds	Kerrville, TX 78028
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Solicitation/Fundraising Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	venue for fundraising breakfast
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense 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 con	pplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/2 Rpt: 11/15	Hill Country Texas Democratic Women	00065537
4 Date	5 Payee name	•
09/21/2024	Doyle Community Center	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	le
\$20.00	110 W. Barnett Street	
Expenditure from corporate funds	Kerrville, TX 78028	
8 PURPOSE		(b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Even Expense	Check if Austin, TX, officeholder living expense
		board meeting conference room rental
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht Office held
experiulture to belieff C/O		
Date	Payee name	
09/03/2024	Rails a Café at the Depot	
Amount (\$)	Payee address; City; State; Zip Coo	le
\$1,548.00	615 E. Schreiner Street	
Expenditure from corporate funds	Kerrville, TX 78028	
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.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		monthly membership luncheon
Operation ONLY if disease	Overlide to 10 ff and a library and a librar	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug H	ht Office held

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/4 Rpt: 12/15 Hill Country Texas Democratic Women 00065537 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS Date Payee name 5 09/24/2024 Bonnie Lee Goldstein Campaign Amount (\$) Payee address; City; State; Zip Code \$400.00 2121 N. Pearl Street #210 Mail Box 1 Expenditure from Dallas, TX 75201 corporate funds TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Check to campaign to be issued on October 7, 2024 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/24/2024 Chika Anyiam Campaign Amount (\$) Payee address; City; State; Zip Code \$400.00 P.O. Box 743201 Expenditure from Dallas, TX 75374 corporate funds TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description

Forms provided by Texas Ethics Commission

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

www.ethics.state.tx.us

Office sought

Contributions/Donations Made By

Candidate/Officeholder name

Candidate/Officeholder/Political Committee

Version V4.1.0.48da51f7

Check if travel outside of Texas. Complete Schedule T.

Check to campaign to be issued on October 7, 2024

Office held

Check if Austin, TX, officeholder living expense

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By	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					
Candidate/Officeholder/Politica	l Committee Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)					
4. Tatal as use Calculula 50	· · · · · · · · · · · · · · · · · · ·	ns how to complete this form.	Commission Files					
1 Total pages Schedule F2: Sch: 2/4 Rpt: 13/15	Hill Country Texas Democratic Wom	en	3 Filer ID (Ethics Commission Filers) 00065537					
4	<u>-</u>							
TOTAL OF UNITEMI	ZED UNPAID INCURRED OBLIGAT	IONS	\$					
5 Date 09/24/2024	6 Payee name Christine Weems Campaign							
7 Amount (\$)	8 Payee address; City; Sta	te; Zip Code						
\$400.00	1300 McGowen Street							
Expenditure from corporate funds	Houston, TX 77004							
9 TYPE OF EXPENDITURE	X Political	Non-Political						
10 PURPOSE OF	(a) Category (See Categories listed at the top of this		outside of Tourse Complete Celestricks T					
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Con	<u> </u>	outside of Texas. Complete Schedule T. n, TX, officeholder living expense					
			npaign to be issued on October 7, 2024					
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held					
Date	Payee name							
09/24/2024	Cynthia Chapa Campaign							
Amount (\$)	· ·	te; Zip Code						
\$400.00	P.O. Box 68111							
Expenditure from corporate funds	San Antonio, TX 78268							
TYPE OF EXPENDITURE	X Political	Non-Political						
PURPOSE	(a) Category (See Categories listed at the top of this							
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Con	· · · · · · · · · · · · · · · · · · ·	outside of Texas. Complete Schedule T. n, TX, officeholder living expense					
	Candidate/Officeriolder/Folitical Con		npaign to be issued on October 7, 2024					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held					

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/4 Rpt: 14/15 Hill Country Texas Democratic Women 00065537 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS Date 5 Payee name 09/24/2024 Holly Taylor Campaign Amount (\$) Payee address; State; Zip Code \$400.00 1101 W. 334th #119 Expenditure from Austin, TX 78705 corporate funds TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Check to campaign to be issued on October 7, 2024 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/24/2024 Liza Rodriguez Campaign Amount (\$) Payee address; City; State; Zip Code \$400.00 5507 E. Evans Road Suite 104 #102 Expenditure from San Antonio, TX 78261 corporate funds TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Check to campaign to be issued on October 7, 2024 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/4 Rpt: 15/15 Hill Country Texas Democratic Women 00065537 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS Date 5 Payee name 09/24/2024 Luz Elena Chapa Campaign Amount (\$) Payee address; State; Zip Code City; \$400.00 P.O. Box 90382 Expenditure from San Antonio, TX 78209 corporate funds TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Check to campaign to be issued on October 7, 2024 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/24/2024 Nancy Mulder Campaign Payee address: Amount (\$) City; State; Zip Code \$400.00 13901 Midway Road #102

Non-Political

Office sought

(b) Description

Check if travel outside of Texas. Complete Schedule T.

Check to campaign to be issued on October 7, 2024

Office held

Check if Austin, TX, officeholder living expense

PMB 498

Dallas, TX 75374

Political

Candidate/Officeholder name

(a) Category (See Categories listed at the top of this schedule)

Candidate/Officeholder/Political Committee

Contributions/Donations Made By

Χ

Expenditure from

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

corporate funds