

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00088949	<b>2</b> Total pages filed: 10
<b>3</b> COMMITTEE NAME Promoting Inclusive Leadership, Legislation, Accountability, and Reform PAC		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 10/27/2024	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 10878 Westheimer Rd Suite 191 Houston, TX 77042		
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mr.	Omar	
	NICKNAME	LAST	SUFFIX
		Kasani	
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 10878 Westheimer Road Suite 119 Houston, TX 77042		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 10878 Westheimer Road Suite 119 Houston, TX 77042		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(832)	877-6207	
<b>9</b> REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
<b>10</b> PERIOD COVERED	Month    Day    Year	THROUGH	Month    Day    Year
	09/27/2024		10/26/2024
<b>11</b> ELECTION	ELECTION DATE Month    Day    Year 11/05/2024	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

**GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Promoting Inclusive Leadership, Legislation, Accountability, and Reform PAC	<b>13 Filer ID</b> (Ethics Commission Filers) 00088949
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported    Andy Meyers    County Commissioner
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$	0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	33,975.91
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$	0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$	0.00
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$	6,369.27
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$	0.00

**16 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Omar Kasani  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this 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 officer administering oath

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**  
ADDENDUM

Page 3 of 10

<b>12 COMMITTEE NAME</b> Promoting Inclusive Leadership, Legislation, Accountability, and Reform PAC		<b>13 Filer ID</b> (Ethics Commission Filers) 00088949
<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Carmen Turner Ft. Bend County Tax Assessor-Collector  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Tameika Carter Criminal District Court Judge  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	
<b>COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported Quincy Patrick Constable Fort Bend County - Precinct 4  B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

# SUBTOTALS - GPAC

<b>17 COMMITTEE NAME</b> Promoting Inclusive Leadership, Legislation, Accountability, and Reform PAC		<b>18 Filer ID</b> (Ethics Commission Filers) 00088949
<b>19 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,000.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 31,975.91
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 1,000.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 10,830.51
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/1 Rpt: 5/10
<b>2</b> FILER NAME Promoting Inclusive Leadership, Legislation, Accountability, and Reform PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00088949
<b>4</b> Date 10/25/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Carmen Turner 4 FT BEND CO <hr/> <b>6</b> Contributor address; City; State; Zip Code  Richmond, TX 77469	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 6/10	
<b>2</b> FILER NAME Promoting Inclusive Leadership, Legislation, Accountability, and Reform PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00088949	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$</b>	
<b>5</b> Date 10/11/2024	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andy Meyers Campaign ..... <b>7</b> Contributor address; City; State; Zip Code  Stafford, TX 77477	<b>8</b> Amount of contribution (\$) \$25,399.89	<b>9</b> In-kind contribution description Campaign Fliers  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andy Meyers Campaign ..... Contributor address; City; State; Zip Code  Stafford, TX 77477	Amount of contribution (\$) \$6,576.02	In-kind contribution description Signs  <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C1: Sch: 1/1 Rpt: 7/10
<b>2</b> FILER NAME Promoting Inclusive Leadership, Legislation, Accountability, and Reform PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00088949
<b>4</b> Date 10/25/2024	<b>5</b> Corporation / Labor Organization name Dibrell & Associates	<b>7</b> Amount of contribution (\$) \$1,000.00
	<b>6</b> Corporation / Labor Organization address; City; State; Zip Code  Katy, TX 77494	

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/3 Rpt: 8/10	2 FILER NAME Promoting Inclusive Leadership, Legislation,	3 Filer ID (Ethics Commission Filers) 00088949
4 Date 10/09/2024	5 Payee name A&N's Halal Kitchen	
6 Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 12925 W Bellfort Ave Sugar Land, TX 77478	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Food
Date 10/04/2024	Payee name AA Jump	
Amount (\$) 296.61 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 4611 S Main St. Ste 1 Stafford, TX 77477	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Tables & Chairs
Date 10/09/2024	Payee name AA Jump	
Amount (\$) 274.96 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 4611 S Main St. Ste. 1 Stafford, TX 77477	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Tables & Chairs
Date 10/18/2024	Payee name AA Jump	
Amount (\$) 238.15 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 4611 S Main St. Ste. 1 Stafford, TX 77477	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Tables & Chairs



# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/3 Rpt: 9/10	2 FILER NAME Promoting Inclusive Leadership, Legislation,	3 Filer ID (Ethics Commission Filers) 00088949
4 Date 10/24/2024	5 Payee name AA Jump	
6 Amount (\$)  348.57 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 4611 S Main St. Ste 1 Stafford, TX 77477	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Tables & Chairs
Date 10/18/2024	Payee name Al Rahmat Sweets	
Amount (\$)  70.36 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 15550 W Airport Blvd Suite C Sugar Land, TX 77498	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Food
Date 10/18/2024	Payee name Kwality	
Amount (\$)  248.98 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 16803 W Airport Blvd Suite 200 Richmond, TX 77407	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense	(b) Description (See instructions regarding type of information required.) Food
Date 10/21/2024	Payee name MSK Signs & Print	
Amount (\$)  433.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 6121 Hillcroft St Suite T2 Houston, TX 77081	
<b>PURPOSE OF EXPENDITURE</b>	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Banners

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/3 Rpt:	2 FILER NAME Promoting Inclusive Leadership, Legislation,	3 Filer ID (Ethics Commission Filers) 00088949
4 Date 10/05/2024	5 Payee name Mandi Cafe	
6 Amount (\$)  494.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 14617 Beechnut St Suite C Houston, TX 77083	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Food/Beverage Expense	<b>(b) Description</b> (See instructions regarding type of information required.) Food
Date 09/30/2024	Payee name SEL-FAST Print	
Amount (\$)  4,525.88 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 10826 Westheimer Rd  Houston, TX 77042	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Advertising Expense	<b>(b) Description</b> (See instructions regarding type of information required.) Fliers
Date 10/25/2024	Payee name SEL-FAST Print	
Amount (\$)  3,400.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 10826 Westheimer Rd  Houston, TX 77042	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See instructions for examples of acceptable categories) Advertising Expense	<b>(b) Description</b> (See instructions regarding type of information required.) Fliers