

COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC
COVER SHEET PG 1

The CEC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00054753	2 Total pages filed: 68
3 COMMITTEE NAME Collin County Democratic Party		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 10/28/2024	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 6829 K Avenue, Suite #111 Plano, TX 75074	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mr. Jared <hr/> NICKNAME LAST SUFFIX Flores	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2932 Regal Road Plano, TX 75075	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2932 Regal Road Plano, TX 75075	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (469) 352-5034	
9 REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final Report <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	
10 PERIOD COVERED		Month Day Year Month Day Year 09/27/2024 THROUGH 10/26/2024	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 11/05/2024 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC
COVER SHEET PG 2

12 COMMITTEE NAME Collin County Democratic Party	13 Filer ID (Ethics Commission Filers) 00054753
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 160.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 68,898.20
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 304,197.98
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 99,045.75
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 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. Jared Flores

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

SUBTOTALS - CEC**FORM CEC**
COVER SHEET PG 3
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17 COMMITTEE NAME Collin County Democratic Party		18 Filer ID 00054753	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	68,898.20
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0.00
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0.00
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	304,197.98
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0.00
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	0.00
9.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	2,454.94
10.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	54.20

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/36 Rpt: 4/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alt, Tara <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75072	7 Amount of Contribution (\$) \$26.13
8 Principal occupation / Job title (See Instructions) Communications		9 Employer (See Instructions) St Peters Episcopal Church
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Liz <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Prosper ISD
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrios, Debra <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bening, Donna <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beuhler, Mark <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$517.75
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/36 Rpt: 5/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Tr <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75208	7 Amount of Contribution (\$) \$1,032.70
8 Principal occupation / Job title (See Instructions) Executive		9 Employer (See Instructions) On-Target Supplies & Logistics
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bledsoe, Ryan <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75069	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Resonating threads studio
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boswell, Sharon <hr/> Contributor address; City; State; Zip Code Celina, TX 75009	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Communication Director		Employer (See Instructions) Prosper UMC
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, Robert <hr/> Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$10.53
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brantley, Shawn <hr/> Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$53.20
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/36 Rpt: 6/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brevard, James <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75002	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brunette, Sakura <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Not Employed
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryant, Karen <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Communications Manager		Employer (See Instructions) MedAssets
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdett, Caren <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burns, Macey <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$10.53
Principal occupation / Job title (See Instructions) Hair stylist		Employer (See Instructions) Styling by Macey

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/36 Rpt: 7/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Ashleigh <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75070	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) ASAFE
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cannici, Jim <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Melissa <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Self Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capusan, Manuela <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cargile, James <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/36 Rpt: 8/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, Ann <hr/> 6 Contributor address; City; State; Zip Code Allen, TX 75002	7 Amount of Contribution (\$) \$48.90
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) JPMorgan Chase
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cevallos, Robert <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$103.75
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Quest Diagnostics
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaganti, Udaya <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Genesis 10
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapin, Terri <hr/> Contributor address; City; State; Zip Code Sherman, TX 75092	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/36 Rpt: 9/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coker, Dana	7 Amount of Contribution (\$) \$52.00
6 Contributor address; City; State; Zip Code McKinney, TX 75070		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Stephanie	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Plano, TX 75075		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Robert Half
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collin County Democratic Party Primary	Amount of Contribution (\$) \$7,407.17
Contributor address; City; State; Zip Code Plano, TX 75074		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Casey	Amount of Contribution (\$) \$20.95
Contributor address; City; State; Zip Code Melissa, TX 75454		
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Baylor Health Care
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruz, BARBARA	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code Sachse, TX 75048		
Principal occupation / Job title (See Instructions) data clerk		Employer (See Instructions) Nwyc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/36 Rpt: 10/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtayne, Eileen <hr/> 6 Contributor address; City; State; Zip Code Prosper, TX 75078	7 Amount of Contribution (\$) \$180.89
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dare, Alissa <hr/> Contributor address; City; State; Zip Code Celina, TX 75009	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darnall, Sally <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Keller Williams
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Depew, Sarah <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$103.75
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Jane <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070	Amount of Contribution (\$) \$940.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/36 Rpt: 11/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dodd, Jane <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75070	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doise, Linsey <hr/> Contributor address; City; State; Zip Code Melissa, TX 75454	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Not Employed
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dressie, Deirdre <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$26.13
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Not Employed
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fair Shot Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Jennifer <hr/> Contributor address; City; State; Zip Code Sachse, TX 75048	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Actuary		Employer (See Instructions) Transamerica

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/36 Rpt: 12/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Follansbee, Janet <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75034	7 Amount of Contribution (\$) \$27.29
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) French, Anne <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$180.89
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frietze, Roxanne <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Disabled		Employer (See Instructions) Unemployed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Furgerson, Susan <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Hair stylist		Employer (See Instructions) Gallerie Salons
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gant, Alan <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$26.13
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/36 Rpt: 13/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gant, Alan <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75075	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gant, Maria <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$180.89
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Contran Corp
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gant, Maria <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Contran Corp
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garvin, Emily <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Nonprofit
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaston, Susan <hr/> Contributor address; City; State; Zip Code McKinney, TX 75070	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/36 Rpt: 14/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geise, David <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75070	7 Amount of Contribution (\$) \$41.65
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glotzbach, Makenzie <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodwin, Katherine <hr/> Contributor address; City; State; Zip Code Plano, TX 75074	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Dispute Resolution Specialist		Employer (See Instructions) KATHERINE GOODWIN
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Govindan, Vijay <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Scrum Master		Employer (See Instructions) AustinCSI
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Sara <hr/> Contributor address; City; State; Zip Code Melissa, TX 75454	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) SLP		Employer (See Instructions) School district

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/36 Rpt: 15/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Maria	7 Amount of Contribution (\$) \$34.27
	6 Contributor address; City; State; Zip Code Allen, TX 75002	
8 Principal occupation / Job title (See Instructions) Financial Analyst		9 Employer (See Instructions) Emerson Smart Factory Inc.
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Patricia	Amount of Contribution (\$) \$31.18
	Contributor address; City; State; Zip Code Richardson, TX 75080	
Principal occupation / Job title (See Instructions) Insurance agent		Employer (See Instructions) Brooke Hull Insurance Agency
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guha, Tappan	Amount of Contribution (\$) \$259.00
	Contributor address; City; State; Zip Code McKinney, TX 75072	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guiffault, Lisa	Amount of Contribution (\$) \$103.75
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Business Manager		Employer (See Instructions) Siemens Government Technology Inc.
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haran, Angela	Amount of Contribution (\$) \$26.13
	Contributor address; City; State; Zip Code Mckinney, TX 75071	
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/36 Rpt: 16/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harbert, Glenda <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75072	7 Amount of Contribution (\$) \$20.95
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Kristen <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Business Consultant		Employer (See Instructions) HCSC
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harsch, Margaret <hr/> Contributor address; City; State; Zip Code McKinney, TX 75069	Amount of Contribution (\$) \$103.75
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) PepsiCo
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Paul <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Havens, Mary K <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/36 Rpt: 17/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Havens, Mary K	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code Plano, TX 75075		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, Kelly	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Plano, TX 75023		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Cowboy cooking
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heasley, Rhonda	Amount of Contribution (\$) \$64.37
Contributor address; City; State; Zip Code Frisco, TX 75033		
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Not Employed
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heiting, Heather	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code Richardson, TX 75080		
Principal occupation / Job title (See Instructions) Buyer		Employer (See Instructions) Siemens
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hons, Cindy and Paul	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code Frisco, TX 75033		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/36 Rpt: 18/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hook, Misty <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75072	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Psychologist		9 Employer (See Instructions) Self
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houchin, Corey <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Frisco ISD
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hy, Philip <hr/> Contributor address; City; State; Zip Code Prosper, TX 75078	Amount of Contribution (\$) \$5.43
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irby, Misty <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070	Amount of Contribution (\$) \$103.45
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Ryan Specialty
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isom, Margaret <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252	Amount of Contribution (\$) \$41.65
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/36 Rpt: 19/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isom, Margaret <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75252	7 Amount of Contribution (\$) \$361.58
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Isom, Margaret <hr/> Contributor address; City; State; Zip Code Dallas, TX 75252	Amount of Contribution (\$) \$361.58
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keck, Tamara <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Brenda <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$57.18
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kennedy, Robert <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/36 Rpt: 20/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight, Elizabeth <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75036	7 Amount of Contribution (\$) \$20.95
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lakes, Sharon <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Communications Director		Employer (See Instructions) Conduent Inc.
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lambert, Meghan <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$31.30
Principal occupation / Job title (See Instructions) Broadcast technician		Employer (See Instructions) Meghan Lambert
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laughlin, Ginny <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$217.03
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) Self
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lechleitner, Carole <hr/> Contributor address; City; State; Zip Code Frisco, TX 75033	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/36 Rpt: 21/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Kelley	7 Amount of Contribution (\$) \$52.00
6 Contributor address; City; State; Zip Code Prosper, TX 75078		
8 Principal occupation / Job title (See Instructions) Nurse		9 Employer (See Instructions) Texas Health Resources
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logan, Jannan	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code Dallas, TX 75287		
Principal occupation / Job title (See Instructions) Hr		Employer (See Instructions) Lennox
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logue, Janet	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Mckinney, TX 75071		
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Not Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lusk, Fred	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luton, Julie	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code Chelsea, MI 48118		
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/36 Rpt: 22/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mackey, Mary <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75082	7 Amount of Contribution (\$) \$52.00
8 Principal occupation / Job title (See Instructions) Controller		9 Employer (See Instructions) Oil and Gas Industry
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malone, Michael <hr/> Contributor address; City; State; Zip Code Murphy, TX 75094	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Verizon
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manry, Lynn <hr/> Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcus, Maury <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marshall, Ann <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Records tech		Employer (See Instructions) Plano police

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/36 Rpt: 23/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarthy, Kimberly	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Frisco, TX 75035		
8 Principal occupation / Job title (See Instructions) HRIS Consultant		9 Employer (See Instructions) Cognizant
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClain, Cheryl	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Plano, TX 75093		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McEwen, Margaret	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Plano, TX 75093		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGuire, Rachel	Amount of Contribution (\$) \$20.95
Contributor address; City; State; Zip Code Plano, TX 75075		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Numerator
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKnight, Beatriz	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Mckinney, TX 75072		
Principal occupation / Job title (See Instructions) Delivery Manager		Employer (See Instructions) Ericsson

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/36 Rpt: 24/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLarty, Eralyn <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75023	7 Amount of Contribution (\$) \$20.95
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McVay, Krysta <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) University of Texas MD Anderson Cancer Center
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Merrill, Walter <hr/> Contributor address; City; State; Zip Code Allen, TX 75002	Amount of Contribution (\$) \$103.75
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) KBR
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Midgen, Barbara <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Rhonda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Sales assistant		Employer (See Instructions) Highland homes

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/36 Rpt: 25/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Ever	7 Amount of Contribution (\$) \$20.95
6 Contributor address; City; State; Zip Code Plano, TX 75025		
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions) Self Employed
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murphy, Sally	Amount of Contribution (\$) \$20.95
Contributor address; City; State; Zip Code Allen, TX 75002		
Principal occupation / Job title (See Instructions) Technical Illustrator		Employer (See Instructions) Collins Aerospace
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) NIECZYPOROWICZ, Betty	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code Plano, TX 75023		
Principal occupation / Job title (See Instructions) Nurse		Employer (See Instructions) Not Employed
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelb, Katherine	Amount of Contribution (\$) \$20.95
Contributor address; City; State; Zip Code Mckinney, TX 75071		
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Epic Systems Corporation
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newbill, William	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Plano, TX 75025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/36 Rpt: 26/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) OConnor, Reagan <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75071	7 Amount of Contribution (\$) \$20.95
8 Principal occupation / Job title (See Instructions) Unemployed		9 Employer (See Instructions) Unemployed
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Omar, Yousuf <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paillet, Marla <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Petersen, Kerry <hr/> Contributor address; City; State; Zip Code Little Elm, TX 75068	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Pinnacle Live
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Karen <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Collin college

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/36 Rpt: 27/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Amber <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75093	7 Amount of Contribution (\$) \$37.51
8 Principal occupation / Job title (See Instructions) N/A		9 Employer (See Instructions) N/A
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollack, Mark <hr/> Contributor address; City; State; Zip Code Richardson, TX 75082	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Program Officer		Employer (See Instructions) Meadows Foundation
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ponder, Chris <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Creative Director		Employer (See Instructions) Spinnaker Support
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pope, Olga <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Eng		Employer (See Instructions) TI
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Powers, Kelly <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072	Amount of Contribution (\$) \$41.65
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/36 Rpt: 28/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Preite, Psul <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75023	7 Amount of Contribution (\$) \$20.95
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prentice, Cara <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$361.58
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prentice, Cara <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Preston, Gerry <hr/> Contributor address; City; State; Zip Code Frisco, TX 75036	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Lance <hr/> Contributor address; City; State; Zip Code Dallas, TX 75287	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) CD Source

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/36 Rpt: 29/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Radjef, Tarek Lucien	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Dallas, TX 75287		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Natasha	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code Celina, TX 75009		
Principal occupation / Job title (See Instructions) Treasurer		Employer (See Instructions) Oldcastle BuildingEnvelope
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Restrepo, Elizabeth	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Plano, TX 75025		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Diana	Amount of Contribution (\$) \$20.95
Contributor address; City; State; Zip Code McKinney, TX 75069		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) dianas healing hands
Date 10/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenthal, Kalabus & Therrian, PLLC	Amount of Contribution (\$) \$600.00
Contributor address; City; State; Zip Code Mckinney, TX 75070		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/36 Rpt: 30/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenthal, Kalabus & Therrian, PLLC	7 Amount of Contribution (\$) \$550.00
6 Contributor address; City; State; Zip Code Mckinney, TX 75070		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sample, Marcella	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code Prosper, TX 75078		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmitt, Valerie	Amount of Contribution (\$) \$20.95
Contributor address; City; State; Zip Code Frisco, TX 75034		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Self Employed
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sells, Lynita	Amount of Contribution (\$) \$26.13
Contributor address; City; State; Zip Code Sachse, TX 75048		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sexton, Mary	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Dallas, TX 75248		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/36 Rpt: 31/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shankar, Krithika	7 Amount of Contribution (\$) \$20.95
6 Contributor address; City; State; Zip Code Plano, TX 75025		
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Citigroup
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, David	Amount of Contribution (\$) \$93.40
Contributor address; City; State; Zip Code Plano, TX 75075		
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) BofA
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Nicole	Amount of Contribution (\$) \$103.75
Contributor address; City; State; Zip Code Mckinney, TX 75069		
Principal occupation / Job title (See Instructions) Executive Assistant		Employer (See Instructions) Airbnb
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Robin	Amount of Contribution (\$) \$20.95
Contributor address; City; State; Zip Code Plano, TX 75025		
Principal occupation / Job title (See Instructions) Loan officer		Employer (See Instructions) PrimeLending
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Ann	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code McKinney, TX 75072		
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/36 Rpt: 32/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis, Michelle	7 Amount of Contribution (\$) \$350.00
6 Contributor address; City; State; Zip Code Plano, TX 75023		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprinkel, Elizabeth	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Plano, TX 75074		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) Not Employed
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon	Amount of Contribution (\$) \$103.75
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stemac, Kellee	Amount of Contribution (\$) \$361.58
Contributor address; City; State; Zip Code Plano, TX 75023		
Principal occupation / Job title (See Instructions) Director		Employer (See Instructions) Prosper ISD
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevenson, Christina	Amount of Contribution (\$) \$52.00
Contributor address; City; State; Zip Code Prosper, TX 75078		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/36 Rpt: 33/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stoker, Allison <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75072	7 Amount of Contribution (\$) \$5.43
8 Principal occupation / Job title (See Instructions) Marketer		9 Employer (See Instructions) Capital One
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ted B Lyon & Associates, PC <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75150	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ted B Lyon & Associates, PC <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75150	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Justice Democrats, PAC <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$27,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Justice Democrats, PAC <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$7,750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/36 Rpt: 34/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Kris	7 Amount of Contribution (\$) \$103.75
6 Contributor address; City; State; Zip Code Allen, TX 75013		
8 Principal occupation / Job title (See Instructions) Marketing and Advertising		9 Employer (See Instructions) Oneicity, Inc.
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Jill	Amount of Contribution (\$) \$517.75
Contributor address; City; State; Zip Code Anna, TX 75409		
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) SteelFab
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Ruth	Amount of Contribution (\$) \$20.95
Contributor address; City; State; Zip Code Des Moines, IA 50321		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Polk county
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tijerina, Michael	Amount of Contribution (\$) \$20.95
Contributor address; City; State; Zip Code Plano, TX 75025		
Principal occupation / Job title (See Instructions) Home Healthcare		Employer (See Instructions) Self
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toigo, Sharla	Amount of Contribution (\$) \$20.95
Contributor address; City; State; Zip Code Plano, TX 75075		
Principal occupation / Job title (See Instructions) legal assistant		Employer (See Instructions) Anderson Grossman, PLLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/36 Rpt: 35/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trollinger, Rachelle <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75071	7 Amount of Contribution (\$) \$103.75
8 Principal occupation / Job title (See Instructions) Emergency Management		9 Employer (See Instructions) FEMA
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vonuelos, Lyna <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Santander
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WHITE, MICHAEL <hr/> Contributor address; City; State; Zip Code Dallas, TX 75367	Amount of Contribution (\$) \$88.23
Principal occupation / Job title (See Instructions) Owner Manager		Employer (See Instructions) Preferred Parking
Date 09/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waite, Amy <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75010	Amount of Contribution (\$) \$52.00
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Dallas area rape crisis center
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Ken <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Self employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/36 Rpt: 36/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Megan <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75071	7 Amount of Contribution (\$) \$52.00
8 Principal occupation / Job title (See Instructions) Legal Operations Specialist		9 Employer (See Instructions) Sol-Ark
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Megan <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75071	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Legal Operations Specialist		Employer (See Instructions) Sol-Ark
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Bethany <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Jamye <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Beyondsoft Consulting
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Werner, MK <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$20.95
Principal occupation / Job title (See Instructions) Education Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/36 Rpt: 37/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Erin <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75035	7 Amount of Contribution (\$) \$26.13
8 Principal occupation / Job title (See Instructions) Appraisal Support Asst Manager		9 Employer (See Instructions) Collin Central Appraisal District
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Lisa <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072	Amount of Contribution (\$) \$103.75
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Lisa <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75072	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) Self Employed
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Sally <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$41.65
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitcher, Lynn <hr/> Contributor address; City; State; Zip Code Lucas, TX 75002	Amount of Contribution (\$) \$103.75
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) MD7

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/36 Rpt: 38/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willis, Brenda	7 Amount of Contribution (\$) \$20.95
6 Contributor address; City; State; Zip Code Dallas, TX 75287		
8 Principal occupation / Job title (See Instructions) Administrator		9 Employer (See Instructions) North Texas Food Bank
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wink, Karin	Amount of Contribution (\$) \$103.75
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Employed
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winters, Carol	Amount of Contribution (\$) \$20.95
Contributor address; City; State; Zip Code Mckinney, TX 75069		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wittenbrook, Gwendolyn	Amount of Contribution (\$) \$26.13
Contributor address; City; State; Zip Code Plano, TX 75024		
Principal occupation / Job title (See Instructions) Dietitian		Employer (See Instructions) Cook childrens
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yu, Eva	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Mckinney, TX 75070		
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) Legent

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/36 Rpt: 39/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hall-gumble, markita <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75072	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Not employed		9 Employer (See Instructions) Not employed

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 40/68

2 FILER NAME
Collin County Democratic Party

3 Filer ID (Ethics Commission Filers)
00054753

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 41/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/24 Rpt: 42/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/10/2024	5 Payee name APG&E	
6 Amount (\$) \$237.13	7 Payee address; City; State; Zip Code 6161 Savoy Drive Ste 500 Houston, TX 77036	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Electricity
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2024	Payee name ActBlue Texas	
Amount (\$) \$0.20	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name ActBlue Texas	
Amount (\$) \$1.19	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 2/24 Rpt: 43/68	2	FILER NAME Collin County Democratic Party	3	Filer ID (Ethics Commission Filers) 00054753
4	Date 10/06/2024	5	Payee name ActBlue Texas		
6	Amount (\$) \$2.59	7	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/13/2024		Payee name ActBlue Texas		
	Amount (\$) \$1.39		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/23/2024		Payee name ActBlue Texas		
	Amount (\$) \$0.32		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

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
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 Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 3/24 Rpt: 44/68	2	FILER NAME Collin County Democratic Party	3	Filer ID (Ethics Commission Filers) 00054753
4	Date 10/21/2024	5	Payee name Amazon.com		
6	Amount (\$) \$41.49	7	Payee address; City; State; Zip Code 410 Terry Ave North Seattle, WA 98109		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/05/2024		Payee name Amazon.com		
	Amount (\$) \$8.65		Payee address; City; State; Zip Code 410 Terry Ave North Seattle, WA 98109		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - dcor		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/03/2024		Payee name Amazon.com		
	Amount (\$) \$69.93		Payee address; City; State; Zip Code 410 Terry Ave North Seattle, WA 98109		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - dcor		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

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
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 Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 4/24 Rpt: 45/68	2	FILER NAME Collin County Democratic Party	3	Filer ID (Ethics Commission Filers) 00054753
4	Date 10/05/2024	5	Payee name Amazon.com		
6	Amount (\$) \$171.47	7	Payee address; City; State; Zip Code 410 Terry Ave North Seattle, WA 98109		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - dcor		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/21/2024		Payee name Atmos Energy		
	Amount (\$) \$94.84		Payee address; City; State; Zip Code PO Box 740353 Cincinnati, OH 45274		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Natural gas		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 09/30/2024		Payee name Berlin Rosen LLC		
	Amount (\$) \$91,200.00		Payee address; City; State; Zip Code 15 Maiden Lane Suite 1600 New York, NY 10038		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Slate cards		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/24 Rpt: 46/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Payee name Berlin Rosen LLC	
6 Amount (\$) \$113,207.04	7 Payee address; City; State; Zip Code 15 Maiden Lane Suite 1600 New York, NY 10038	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Slate cards
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2024	Payee name Bumperactive LLC	
Amount (\$) \$3.13	Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/01/2024	Payee name Bumperactive LLC	
Amount (\$) \$21.87	Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 6/24 Rpt: 47/68	2	FILER NAME Collin County Democratic Party	3	Filer ID (Ethics Commission Filers) 00054753
4	Date 10/02/2024	5	Payee name Bumperactive LLC		
6	Amount (\$) \$7.30	7	Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/03/2024		Payee name Bumperactive LLC		
	Amount (\$) \$1.29		Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/04/2024		Payee name Bumperactive LLC		
	Amount (\$) \$4.83		Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/24 Rpt: 48/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
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4 Date 10/07/2024	5 Payee name Bumperactive LLC
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6 Amount (\$) \$3.46	7 Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/08/2024	Payee name Bumperactive LLC
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Amount (\$) \$1.15	Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/09/2024	Payee name Bumperactive LLC
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Amount (\$) \$4.29	Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/24 Rpt: 49/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/10/2024	5 Payee name Bumperactive LLC	
6 Amount (\$) \$6.20	7 Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/11/2024	Payee name Bumperactive LLC	
Amount (\$) \$1.15	Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Bumperactive LLC	
Amount (\$) \$6.17	Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/24 Rpt: 50/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/16/2024	5 Payee name Bumperactive LLC	
6 Amount (\$) \$2.44	7 Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/17/2024	Payee name Bumperactive LLC	
Amount (\$) \$11.64	Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/23/2024	Payee name Bumperactive LLC	
Amount (\$) \$2.31	Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/24 Rpt: 51/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/26/2024	5 Payee name Canva	
6 Amount (\$) \$12.95	7 Payee address; City; State; Zip Code 2140 S Dupont Highway Camden, DE 19934	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web design
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2024	Payee name Chartwells Catering	
Amount (\$) \$28,934.93	Payee address; City; State; Zip Code 800 W Campbell PS3 Richardson, TX 75080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - food
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/10/2024	Payee name Clear Channel Outdoor	
Amount (\$) \$6,600.00	Payee address; City; State; Zip Code P.O. Box 847247 Dallas, TX 75284	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Get-out-the-vote electronic billboard
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 11/24 Rpt: 52/68	2	FILER NAME Collin County Democratic Party	3	Filer ID (Ethics Commission Filers) 00054753
4	Date 10/10/2024	5	Payee name Constant Contact Inc.		
6	Amount (\$) \$261.17	7	Payee address; City; State; Zip Code 1601 Trapelo Road Suite 329 Waltham, MA 02451		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications		
9		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/05/2024		Payee name Costco		
	Amount (\$) \$153.63		Payee address; City; State; Zip Code 3800 Central Expressway Plano, TX 75074		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - beverages		
		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 10/05/2024		Payee name Crown Awards		
	Amount (\$) \$94.78		Payee address; City; State; Zip Code 9 Skyline Drive Hawthorne, NY 10532		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - award		
		Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/24 Rpt: 53/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/05/2024	5 Payee name Dollar Tree	
6 Amount (\$) \$113.66	7 Payee address; City; State; Zip Code 3001 S Central Expy Ste 304 McKinney, TX 75070	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - dcor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2024	Payee name Dominos	
Amount (\$) \$59.48	Payee address; City; State; Zip Code 1210 E Main Allen, TX 75002	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Voter registration event - food
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2024	Payee name Edwards and Patterson Signs	
Amount (\$) \$1,301.71	Payee address; City; State; Zip Code 203 S. Belt Line Rd. Suite 100 Irving, TX 75060	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Elect Democratic Judges yard signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/24 Rpt: 54/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/03/2024	5 Payee name Frisco Democrats PAC	
6 Amount (\$) \$394.40	7 Payee address; City; State; Zip Code 5570 FM 423 Ste 250-4040 Frisco, TX 75036	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event proceeds
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/04/2024	Payee name Frontier	
Amount (\$) \$143.76	Payee address; City; State; Zip Code PO Box 74047 Cincinnati, OH 45274-0407	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/04/2024	Payee name Gay, Errin	
Amount (\$) \$1,797.41	Payee address; City; State; Zip Code 1912 Fresno Rd Plano, TX 75074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/24 Rpt: 55/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/18/2024	5 Payee name Gay, Errin	
6 Amount (\$) \$1,780.53	7 Payee address; City; State; Zip Code 1912 Fresno Rd Plano, TX 75074	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2024	Payee name Google LLC	
Amount (\$) \$30.70	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/04/2024	Payee name Guitar and Growlers	
Amount (\$) \$2,476.79	Payee address; City; State; Zip Code 581 Cambell Rd Ste 101 Richardson, TX 75080	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - beverages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/24 Rpt: 56/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
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4 Date 10/21/2024	5 Payee name Intuit Inc.
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6 Amount (\$) \$111.93	7 Payee address; City; State; Zip Code 2800 E. Commerce Center Place Tucson, AZ 85706
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense QuickBooks Online
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/21/2024	Payee name Intuit Inc.
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Amount (\$) \$150.31	Payee address; City; State; Zip Code 2800 E. Commerce Center Place Tucson, AZ 85706
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense QuickBooks Online
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/07/2024	Payee name Korrin Welch
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Amount (\$) \$267.71	Payee address; City; State; Zip Code 4725 Wickersham Drive Plano, TX 75093
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - flowers
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/24 Rpt: 57/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
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4 Date 09/27/2024	5 Payee name Legacy Plano Master LLC
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6 Amount (\$) \$2,884.08	7 Payee address; City; State; Zip Code PO Box 803289 Dallas, TX 75380-3289
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lease payment
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/26/2024	Payee name Legacy Plano Master LLC
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Amount (\$) \$2,884.08	Payee address; City; State; Zip Code PO Box 803289 Dallas, TX 75380-3289
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lease payment
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/11/2024	Payee name McKinney Area Democratic Club
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Amount (\$) \$394.40	Payee address; City; State; Zip Code 5100 Eldorado Pkwy Ste 102-377 McKinney, TX 75070
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event proceeds
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/24 Rpt: 58/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/02/2024	5 Payee name NGP VAN Inc.	
6 Amount (\$) \$1,848.38	7 Payee address; City; State; Zip Code PO Box 392264 Pittsburgh, PA 15251-9264	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/03/2024	Payee name NGP VAN Inc.	
Amount (\$) \$474.37	Payee address; City; State; Zip Code PO Box 392264 Pittsburgh, PA 15251-9264	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donor database monthly fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2024	Payee name Office Depot #138	
Amount (\$) \$9.73	Payee address; City; State; Zip Code 909 N Central Expresway 100 Plano, TX 75075	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/24 Rpt: 59/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/23/2024	5 Payee name Otter.ai, Inc.	
6 Amount (\$) \$99.99	7 Payee address; City; State; Zip Code 800 W El Camino Real Suite 170 Mountain View, TX 94040	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting minutes software
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/03/2024	Payee name Plano Area Democrats	
Amount (\$) \$394.40	Payee address; City; State; Zip Code PO Box 251373 Plano, TX 75025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event proceeds
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2024	Payee name Primary Media Outdoor Advertising	
Amount (\$) \$9,000.00	Payee address; City; State; Zip Code 2511 Boll Street Dallas, TX 75204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Get-out-the-vote electronic billboard
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/24 Rpt: 60/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/11/2024	5 Payee name Primary Media Outdoor Advertising	
6 Amount (\$) \$10,000.00	7 Payee address; City; State; Zip Code 2511 Boll Street Dallas, TX 75204	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Get-out-the-vote electronic billboard
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/11/2024	Payee name Primary Media Outdoor Advertising	
Amount (\$) \$2,060.00	Payee address; City; State; Zip Code 2511 Boll Street Dallas, TX 75204	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Get-out-the-vote electronic billboard
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/09/2024	Payee name Prosperity Bank	
Amount (\$) \$35.00	Payee address; City; State; Zip Code PO Box 869105 Plano, TX 75086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stop check fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 20/24 Rpt: 61/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/18/2024	5 Payee name RdRc Mechanical Service, Inc.	
6 Amount (\$) \$270.63	7 Payee address; City; State; Zip Code 6256 Green Valley Circle Aubrey, TX 76227	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HVAC services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Reilly Echols Printing Inc	
Amount (\$) \$141.18	Payee address; City; State; Zip Code PO Box 152358 Dallas, TX 75315-2358	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Slate cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Reilly Echols Printing Inc	
Amount (\$) \$529.79	Payee address; City; State; Zip Code PO Box 152358 Dallas, TX 75315-2358	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Slate cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 21/24 Rpt: 62/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/15/2024	5 Payee name Reilly Echols Printing Inc	
6 Amount (\$) \$15,247.06	7 Payee address; City; State; Zip Code PO Box 152358 Dallas, TX 75315-2358	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Slate cards
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2024	Payee name Simplisafe Inc.	
Amount (\$) \$32.46	Payee address; City; State; Zip Code 294 Washington St Ninth Floor Boston, MA 02108	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security monitoring
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2024	Payee name Staples Dallas	
Amount (\$) \$142.88	Payee address; City; State; Zip Code 16817 Coit Road Dallas, TX 75248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 22/24 Rpt: 63/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
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4 Date 10/21/2024	5 Payee name Texas Workforce Commission
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6 Amount (\$) \$10.50	7 Payee address; City; State; Zip Code PO Box 149037 Austin, TX 78714-9037
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/07/2024	Payee name The Home Depot
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Amount (\$) \$1,389.62	Payee address; City; State; Zip Code 2605 Eldorado Pkwy McKinney, TX 75070
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T posts for road signs
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/09/2024	Payee name The Reiss Group
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Amount (\$) \$3,434.00	Payee address; City; State; Zip Code 2604 Golden Meadow Court McKinney, TX 75069
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Get-out-the-vote electronic billboard
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 23/24 Rpt: 64/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/07/2024	5 Payee name USPS	
6 Amount (\$) \$689.15	7 Payee address; City; State; Zip Code 1112 18th St Plano, TX 75074	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/22/2024	Payee name USPS	
Amount (\$) \$842.55	Payee address; City; State; Zip Code 1112 18th St Plano, TX 75074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2024	Payee name United States Treasury	
Amount (\$) \$993.98	Payee address; City; State; Zip Code Internal Revenue Service Ogden, UT 84201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll Taxes
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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
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 Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 24/24 Rpt: 65/68	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
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4 Date 10/16/2024	5 Payee name Vonage Business Inc
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6 Amount (\$) \$142.73	7 Payee address; City; State; Zip Code Dept. 3151 PO Box 123151 Dallas, TX 75312-3151
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telephone service
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/15/2024	Payee name WOW Democrats
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Amount (\$) \$394.40	Payee address; City; State; Zip Code 125 Fountain Ct 211 Fairview, TX 75069
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event proceeds
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/26/2024	Payee name Zoom Video Communications Inc.
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Amount (\$) \$53.30	Payee address; City; State; Zip Code 55 Amaden Blvd San Jose, CA 95113
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly fee
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/2 Rpt:	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/15/2024	5 Payee name Collin County Democratic Party Primary	
6 Amount (\$) 540.00	7 Payee Address; City; State; Zip 6829 K Ave Ste 111 Plano, TX 75074	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) SUTA advance	(b) Description (See instructions regarding type of information required.) SUTA advance
Date 10/07/2024	Payee name Dement, Stephanie	
Amount (\$) 53.20	Payee Address; City; State; Zip 6303 Orchard Park Dr Frisco, TX 75034	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Return of Contribution	(b) Description (See instructions regarding type of information required.) Return of Contribution
Date 10/02/2024	Payee name Dixon, Larry	
Amount (\$) 29.27	Payee Address; City; State; Zip 3833 Nantucket Dr Plano, TX 75023	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Return of Contribution	(b) Description (See instructions regarding type of information required.) Return of Contribution
Date 10/01/2024	Payee name Michel, Elizabeth	
Amount (\$) 1,750.00	Payee Address; City; State; Zip 6205 Eaglestone Dr McKinney, TX 75070	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Return of Contribution	(b) Description (See instructions regarding type of information required.) Return of Contribution

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/2 Rpt:	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/01/2024	5 Payee name Oneill, Jacqueline	
6 Amount (\$) 29.27	7 Payee Address; City; State; Zip 6982 Aspen Creek Ln Dallas, TX 75252	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Return of Contribution	(b) Description (See instructions regarding type of information required.) Return of Contribution
Date 10/01/2024	Payee name Vermeer, Jessica	
Amount (\$) 53.20	Payee Address; City; State; Zip 2700 Burlwood Ct Plano, TX 75074	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Return of Contribution	(b) Description (See instructions regarding type of information required.) Return of Contribution

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 68/68
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 09/30/2024	5 Name of person from whom amount is received Prosperity Bank	8 Amount (\$) \$54.20
	6 Address of person from whom amount is received; City; State; Zip Code Plano, TX 75086	
	7 Purpose for which amount is received Interest	<input type="checkbox"/> Check if political contribution returned to filer