CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

AFFIX NOTARY S	TAMP / SEAL ABOVE		Other reports: I sw report not later than ti that the report as orig swear, or affirm, that filed was made in goo	ne 14th busines inally filed is in any error or or	that I am filing this c ss day after the date accurate or incomple hission in the report a	or to corrected I learned ete. I
			report not later than that the report as orig swear, or affirm, that	ne 14th busines inally filed is in any error or or od faith.	that I am filing this c ss day after the date accurate or incomple nission in the report a	or to corrected I learned ete. I
			report not later than that the report as orig swear, or affirm, that	ne 14th busines inally filed is in any error or or	that I am filing this c ss day after the date accurate or incomple	or to corrected I learned ete. I
			Other reports: sv	vear. or affirm.		or to
			was made in good fai misrepresent the info	th and without	an intent to mislead	
		Che	eck the box next to any a Semiannual reports			al roport
8 AFFIDAVIT			vear, or affirm, under pe l correct.	nalty of perjury	r, that this corrected	report is true
COVERED 7 EXPLANATION OF	Month Day Yea 07/01/2024 CORRECTION s current title from Rep to Se	THROUGH	Month Day 09/26/2024 eichek's last name (cha	Year	Date Imaged	
6 ORIGINAL PERIOD	8th day before election		er (specify)	Year	Date Processed	
5 ORIGINAL REPORT TYPE	January 15 July 15 X 30th day before election		off n day after campaign treasu solution report	rer resignation	Receipt #	Amount
4 TREASURER NAME	Havran, James				Date Hand-delivered or [Date Postmarked
3 COMMITTEE NAME	Stonewall Democrats c	f Dallas PAC			ELECTRONICA 10/27/2024	LLY FILED
	nics Commission Filers)	2 Total pages filed: 53			OFFICE U	SEONLY

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.	1 Filer ID (Ethics Commission Filers) 00053855	2 Total pages filed: 53
3 COMMITTEE NAME		OFFICE USE ONLY
Stonewall Democrats of Dallas PAC		Date Received
		ELECTRONICALLY FILED
		10/27/2024
4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CI	TY; STATE; ZIP CODE	
ADDRESS P.O. Box 192305		Data Usual delivered en Data Destructural
		Date Hand-delivered or Date Postmarked
Change of Address Dallas, TX 75219		Receipt # Amount
		Date Processed
		Date Imaged
5 CAMPAIGN MS / MRS / MR FIRST		MI
TREASURER James		
NICKNAME LAST		SUFFIX
Havran		
6 CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); TREASURER 4224 Develops Chroat #104	APT / SUITE #; CITY;	STATE; ZIP CODE
STREET 4224 Rawiins Street #104		
ADDRESS		
(Residence or Business) Dallas, TX 75219		
7 CAMPAIGN STREET OR PO BOX; TREASURER	APT / SUITE #; CITY;	STATE; ZIP CODE
MAILING 4224 Rawlins Street #104		
ADDRESS		
Change of Address Dallas, TX 75219		
	EXTENSION	
TREASURER PHONE (972) 689-7665		
9 REPORT January 15 X 3	Oth day before election	Dissolution (Attach PAC-DR)
	h day before election	10th day after campaign treasurer
July 15	unoff	termination
10 PERIOD Month Day Year COVERED 07/01/2024 T	Month Day	Year
07/01/2024 T	HROUGH 09/26/2024	1
	ELECTION TYPE	
11 ELECTION ELECTION DATE Month Day Year	Primary Runoff	Other
11/05/2024		
	General Special	
GO	TO PAGE 2	
Forms provided by Texas Ethics Commission www.e	thics.state.tx.us	Version V4.1.0.48da51f7

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Stonewall Democrats of	f Dallas PAC		0005385	5
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Democrat		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	5,599.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	9,509.25
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	33,834.98
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		James	Havran	
		Signature of Car	npaign Treas	Surer
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, th	is the	day
01	_, 20, to certify v	which, whiless my hand and sear of onice.		
Signature of officer ad	dministering oath	Printed name of officer administering oath	Title of of	ficer administering oath
Forms provided by Texas I	Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.48da51f7

FORM GPAC

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Stonewall Democrats o	f Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Kamala Harris US President		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Tim Walz US Vice President		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Rep. Colin Allred US Senate		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)	l			

FORM GPAC

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Stonewall Democrats of	f Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ruth Torres US Rep - District 5		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Sam Eppler US Rep - District 24		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Rep. Jasmine Crockett US Rep	- District 30	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
		1			

FORM GPAC

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Stonewall Democrats of	f Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Julie Johnson US Rep - District	32	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Rep. Marc Veasey US Rep - Dis	strict 33	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge DaSean Jones TX Supre	me Court, Plac	e 2
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
		1			

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12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Stonewall Democrats of	f Dallas PAC			00053855
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Christine Vinh Weems T>	Supreme Court, Place 4
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Bonnie Lee Goldstein TX	Supreme Court, Place 6
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Holly Taylor Court of Crin	ninal Appeals, Presiding Judge
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	1	1		

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12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)	
Stonewall Democrats o	f Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Nancy Mulder Court Of	f Criminal Appeal	s, Judge
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supported	Judge Chika Anyiam Court Of	f Criminal Anneal	s Judge
ACTIVITY	(Identify by name or, if applicable, classify by party.)			Chinina Appeai	s, Juuye
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supported	Rayna Glasser State Board O	of Education	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				

FORM GPAC

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Stonewall Democrats of	f Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	George King State Boa	ard Of Education	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Tiffany Clark State Boa	ard Of Education	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Katherine Culbert Rail	road Commissioner	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				

FORM GPAC

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Stonewall Democrats of	Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Stephanie Draper State Senator	-	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supported	Rep. Nathan Johnson State Sen	ator	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		itep. Nathan Johnson State Ser	ιαι υ ι	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supported	Sen. Royce West State Senator		
ACTIVITY	(Identify by name or, if applicable, classify by party.)		-		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Stonewall Democrats of Dallas PAC				00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Rep. Ana-Maria Ramos State R	epresentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Rep. Venton Jones State Repre	sentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Rep. Rafael Anchía State Repre	esentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
			(othing state ty us		

FORM GPAC

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Stonewall Democrats of	Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Rep. Jessica González State Re	epresentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supported	Don Torry Moza, State Doproco	ntativo	
ACTIVITY	(Identify by name or, if applicable, classify by party.)	A. Supported	Rep. Terry Meza State Represe	nialive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supported	Linda Garcia State Representati	ive	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				

FORM GPAC

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12 COMMITTEE NAME					(Ethics Commission Filers)
Stonewall Democrats of	Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Elizabeth Ginsberg State Repres	sentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Aicha Davis State Representativ	/e	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Toni Rose State Representative		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
			, othing state ty up		Version V/4.1.0.40deE1f7

FORM GPAC ADDENDUM

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Stonewall Democrats of	f Dallas PAC				00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Yvonne Davis	State Represent	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
				<u></u>		
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Averie Bishop	State Represent	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Rep. Rhetta Ar	ndrews Bowers S	State Represent	ative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
Forms provided by Teyas F	thiss Commission		ethics state tx			Version V4.1.0.48da51f7

FORM GPAC ADDENDUM

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12 COMMITTEE NAME					(Ethics Commission Filers)
Stonewall Democrats of	f Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Rep. John Bryant State Represe	entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Cassandra Hernandez State Re	presentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Staci Williams Court of Ap	opeals,Chief Ju	istice
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
Forms provided by Teyes F	thios Commission		athics state ty us		Version V/4 1 0 48da51f7

FORM GPAC ADDENDUM

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12 COMMITTEE NAME					(Ethics Commission Filers)
Stonewall Democrats of	f Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Robbie Partida-Kipness	Court Of Appea	ls, Justice
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Erin Nowell Court Of App	oeals, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Tina Clinton Court Of Ap	peals, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
Forms provided by Tayas F			athics state ty us		Version V/4.1.0.48da51f7

FORM GPAC

ADDENDUM Page 17 of 53

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Stonewall Democrats of	f Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Amanda Reichek Court C	of Appeals, Jus	tice
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Kim Cooks Court Of Appe	eals, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1	A Supported	Judge Ken Melberg, Court Of An	magla lugtica	
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Judge Ken Molberg Court Of Ap	peais, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if				
	applicable, classify by party.)		u athian atota tu un		Version V/4.1.0.40deF1F

FORM GPAC ADDENDUM

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Stonewall Democrats of	f Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Tonya Parker Court Of A	ppeals, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Eric Moyé District Judge		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Monica Purdy District Juc	lge	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
Forms provided by Teyas F	Thiss Commission		athics state ty us		Version V/4 1 0 48da51f7

FORM GPAC

Page 19 of 53

12 COMMITTEE NAME					(Ethics Commission Filers)
Stonewall Democrats of	f Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Kim Bailey District Judge		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Elizabeth Davis Frizell Cr	iminal District C	Court Judge
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Audra Ladawn Riley Crim	inal District Co	urt Judge
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

Page 20 of 53

12 COMMITTEE NAME		13 Filer ID	(Ethics Commission Filers)		
Stonewall Democrats of	f Dallas PAC			00053855	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Judge Dominique Collins Crimin	al District Cour	t Judge
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	I				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	John Ames County Tax Assesso		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Theresa Marie Daniel Dallas Co	unty Commissi	oner - Place 1
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
Forms provided by Texas F	thics Commission		ethics state ty us		Version V4 1 0 48da51f7

FORM GPAC

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Stonewall Democrats of	Dallas PAC				00053855	
14 COMMITTEE ACTIVITY	A. Supported	John Wiley Pri	ce Dallas County	Commisioner -	Place 3	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Marian Brown	Dallas County Sh	eriff	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	3. Officeholders Assisted (Identify by name or, if					

FORM GPAC COVER SHEET PG 3 22 of 53

17 COMMITT	17 COMMITTEE NAME 18 Filer ID (E						
Stonewall	Democrats of Dallas PAC	00053855					
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT				
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 5,599.00				
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$				
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$				
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$				
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$				
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	ANIZATION	\$				
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$				
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$				
9.	SCHEDULE E: LOANS		\$				
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 9,509.25				
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$				
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$				

SUBTOTALS - GPAC

	The Instru	ction Guide explains how to	o complete this fe	orm.	1	Total pages Schedule A1: Sch: 1/20 Rpt: 23/53	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
1		emocrats of Dallas PAC			ľ	00053855	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/08/2024	4 Aceves, Maria					\$35.00
		6 Contributor address; City; State			1		
		Irving, TX 75060					
8		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Lawyer			Aceves Law			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	07/26/2024	Almodovar, Allen					\$35.00
		Contributor address; City; State			1		
		Dallas, TX 75220					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Archives			Government			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/02/2024	Ames, John (The Honorable)					\$125.00
		Contributor address; City; State			1		
		DeSoto, TX 75115					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Tax Assesso)r		Dallas County			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/02/2024	Arango, Alejandro					\$16.00
		Contributor address; City; State			1		
		San Juan, TX 78589					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/03/2024	Benavides, Adrienne					\$35.00
		Contributor address; City; State	e; Zip Code		1		
		Richardson, TX 75082					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Program Ma	nager		Micron Technology Inc			

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/20 Rpt: 24/53	
2	FILER NAME			3	Filer ID (Ethics Commission	ו Filers)
	Stonewall De	emocrats of Dallas PAC			00053855	
4		5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/17/2024	Bethune Ward, Edward				\$35.00
		6 Contributor address; City; State; Zip Code				
		Dallas, TX 75218				
8	Principal occu Educator	pation / Job title (See Instructions)	9 Employer (See Instructions) Dallas DISD	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/01/2024	Bickerstaff, Sarah				\$28.00
		Contributor address; City; State; Zip Code		1		
		Dollar TV 75225				
-	Princinal occu	Dallas, TX 75235 pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Еппсіра осса			り		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/31/2024	Bracey Huff, Monique				\$35.00
		Contributor address; City; State; Zip Code		1		
		Contand TV 75049				
	Dringing occ	Garland, TX 75043 Ipation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
	Attorney		Monique Bracey Attorne		at I aw	
╞				·/ 、 		
	Date 08/08/2024	Full name of contributor out-of-state PAC (ID#: Brady, Joy)		Amount of Contribution (\$)	\$35.00
	00/00/2024			-		φ33.00
		Contributor address; City; State; Zip Code				
		Garland, TX 75043				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Retired		Self			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/30/2024	Brooks, Peter				\$104.00
		Contributor address; City; State; Zip Code		1		
		Dallas, TX 75206				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
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The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/20 Rpt: 25/53	
2 FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
Stonewall De	emocrats of Dallas PAC			00053855	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
09/14/2024	Bueno, Alexander				\$35.00
	6 Contributor address; City; State; Zip Code		1		
	Dallas, TX 75219				
8 Principal occur	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> s)		
Teacher's Aid	ide	Uplift Education			
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
07/24/2024					\$35.00
	Contributor address; City; State; Zip Code				
	Dallas, TX 75218				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	」 s)		
Producer		The Virtual Wild	.,		
Date	Full name of contributor Out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
09/08/2024	Cole, Erica			Amount of Comments of Co	\$20.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75218				
	pation / Job title (See Instructions)	Employer (See Instructions	s)		
Self-Employe	ed	Self-Employed			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
09/08/2024	Cole, Erica				\$35.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75218	<u> </u>	Ļ		
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Self-Employe		Self-Employed	—		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* ~2 00
09/23/2024	Cortes, Jaime				\$60.00
	Contributor address; City; State; Zip Code				
	Dallas, TX 75208				
Principal occur	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
· · · · · · · · · · · · · · · ·			-,		
		<u>I</u>			

i i	ction Guide explains how to complete	e this form.		Total pages Schedule A1: Sch: 4/20 Rpt: 26/53	
2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
Stonewall D	emocrats of Dallas PAC			00053855	
4 Date	5 Full name of contributor out-of-state P.	PAC (ID#:)	7	Amount of Contribution (\$)	
09/15/2024	Criste, DJ				\$100.00
	6 Contributor address; City; State; Zip Code		···		
	Bedford, TX 76021				
8 Principal occu HR Technol	upation / Job title (See Instructions) ogy	9 Employer (See Instruction AT&T	ns)		
Date	Full name of contributor out-of-state P	PAC (ID#:)		Amount of Contribution (\$)	
08/07/2024	Cruz, Ann				\$35.00
	Contributor address; City; State; Zip Code				
	Duncanville, TX 75116	<u> </u>			
	upation / Job title (See Instructions)	Employer (See Instruction	ns)		
Court Coord	Inator	Dallas County			
Date	Full name of contributor out-of-state P	PAC (ID#:)		Amount of Contribution (\$)	
08/17/2024	Davidson, Donald		.]		\$60.00
	Contributor address; City; State; Zip Code]		
1	Dallas TV 75225				
Principal occu	Dallas, TX 75235	Employer (See Instruction			
	I upation / Job title (See Instructions)	Employer (See Instruction	ns)		
Hair Designe	pation / Job title (See Instructions) er	ULTA			
Hair Designe Date	upation / Job title (See Instructions) er Full name of contributor out-of-state P.	ULTA		Amount of Contribution (\$)	¢250.00
Hair Designe	pation / Job title (See Instructions) er Full name of contributor out-of-state P. Donovan, Carol	ULTA		Amount of Contribution (\$)	\$250.00
Hair Designe Date	upation / Job title (See Instructions) er Full name of contributor out-of-state P.	ULTA		Amount of Contribution (\$)	\$250.00
Hair Designe Date	pation / Job title (See Instructions) er Full name of contributor out-of-state P. Donovan, Carol	ULTA		Amount of Contribution (\$)	\$250.00
Hair Designe Date	pation / Job title (See Instructions) er Full name of contributor out-of-state P. Donovan, Carol	ULTA		Amount of Contribution (\$)	\$250.00
Hair Designo Date 09/08/2024	Partion / Job title (See Instructions) er Full name of contributor out-of-state P. Donovan, Carol Contributor address; City; State; Zip Code	ULTA		Amount of Contribution (\$)	\$250.00
Hair Designo Date 09/08/2024	Full name of contributor out-of-state P. Donovan, Carol Contributor address; City; State; Zip Code Dallas, TX 75214 upation / Job title (See Instructions)	ULTA)		Amount of Contribution (\$)	\$250.00
Hair Designe Date 09/08/2024 Principal occu	Inpation / Job title (See Instructions) er Full name of contributor Donovan, Carol Contributor address; City; State; Zip Code Dallas, TX 75214 upation / Job title (See Instructions) ediator	ULTA DAC (ID#:) Employer (See Instruction	ns)		\$250.00
Hair Designe Date 09/08/2024 Principal occu Attorney-Me	Ipation / Job title (See Instructions) er Full name of contributor Donovan, Carol Contributor address; City; State; Zip Code Dallas, TX 75214 upation / Job title (See Instructions) ediator Full name of contributor	ULTA DAC (ID#:) Employer (See Instruction	ns)	Amount of Contribution (\$)	\$250.00
Hair Designe Date 09/08/2024 Principal occu Attorney-Me Date	Ipation / Job title (See Instructions) er Full name of contributor out-of-state P. Donovan, Carol Contributor address; City; State; Zip Code Dallas, TX 75214 upation / Job title (See Instructions) ediator Full name of contributor Gut-of-state P. Dallas, TX 75214 upation / Job title (See Instructions) ediator Full name of contributor Gut-of-state P. Farley, Susan	ULTA	ns)		
Hair Designe Date 09/08/2024 Principal occu Attorney-Me Date	Ipation / Job title (See Instructions) er Full name of contributor out-of-state P. Donovan, Carol Contributor address; City; State; Zip Code Dallas, TX 75214 upation / Job title (See Instructions) ediator Full name of contributor Gut-of-state P. Dallas, TX 75214 upation / Job title (See Instructions) ediator Full name of contributor Gut-of-state P. Farley, Susan	ULTA	ns)		
Hair Designe Date 09/08/2024 Principal occu Attorney-Me Date	Ipation / Job title (See Instructions) er Full name of contributor out-of-state P. Donovan, Carol Contributor address; City; State; Zip Code Dallas, TX 75214 upation / Job title (See Instructions) ediator Full name of contributor Gut-of-state P. Dallas, TX 75214 upation / Job title (See Instructions) ediator Full name of contributor Gut-of-state P. Farley, Susan	ULTA	ns)		
Hair Designe Date 09/08/2024 Principal occu Attorney-Me Date	Ipation / Job title (See Instructions) er Full name of contributor out-of-state P. Donovan, Carol Contributor address; City; State; Zip Code Dallas, TX 75214 upation / Job title (See Instructions) ediator Full name of contributor Gut-of-state P. Dallas, TX 75214 upation / Job title (See Instructions) ediator Full name of contributor Gut-of-state P. Farley, Susan	ULTA	ns)		
Hair Designe Date 09/08/2024 Principal occu Attorney-Me Date 08/03/2024	Impation / Job title (See Instructions) er Full name of contributor Donovan, Carol Contributor address; City; State; Zip Code Dallas, TX 75214 upation / Job title (See Instructions) ediator Full name of contributor Gout-of-state P. Darlas, TX 75214 upation / Job title (See Instructions) ediator Full name of contributor Gout-of-state P. Farley, Susan Contributor address; City; State; Zip Code	ULTA	ns)		
Hair Designe Date 09/08/2024 Principal occu Attorney-Me Date 08/03/2024	Impation / Job title (See Instructions) er Full name of contributor out-of-state P. Donovan, Carol Contributor address; City; State; Zip Code Dallas, TX 75214 upation / Job title (See Instructions) ediator Full name of contributor Guite Full name of contributor Contributor address; City; State; Zip Code Dallas, TX 75214 upation / Job title (See Instructions) ediator Contributor address; City; State; Zip Code Dallas, TX 75201	ULTA	ns)		
Hair Designe Date 09/08/2024 Principal occu Attorney-Me Date 08/03/2024	Impation / Job title (See Instructions) er Full name of contributor out-of-state P. Donovan, Carol Contributor address; City; State; Zip Code Dallas, TX 75214 upation / Job title (See Instructions) ediator Full name of contributor Guite Full name of contributor Contributor address; City; State; Zip Code Dallas, TX 75214 upation / Job title (See Instructions) ediator Contributor address; City; State; Zip Code Dallas, TX 75201	ULTA	ns)		

The Instrue	ction Guide explains how	to complete this f	orm.	1	tal pages Schedule A1: ch: 5/20 Rpt: 27/53	
2 FILER NAME				3 Fil	er ID (Ethics Commission	n Filers)
Stonewall De	emocrats of Dallas PAC				0053855	,
4 Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7 An	nount of Contribution (\$)	
09/20/2024	Fikes, Amy					\$500.00
	6 Contributor address; City; St	tate; Zip Code				
2 Dringingloggy	Dallas, TX 75205	<u></u>				
8 Principal occu	pation / Job title (See Instructions	;)	9 Employer (See Instructions	5)		
Date	Full name of contributor	out-of-state PAC (ID#:_)	An	nount of Contribution (\$)	
09/15/2024	Flores, Aidan					\$15.00
	Contributor address; City; St					
- • • •	Rockwall, TX 75087	-	1 _ · · /2 · · · ·			
	pation / Job title (See Instructions	i)	Employer (See Instructions	5)		
Real Estate			Aidan Flores Group	1		
Date	Full name of contributor	out-of-state PAC (ID#:_)	An	nount of Contribution (\$)	÷05 00
07/23/2024	Forsyth, Thomas					\$35.00
	Contributor address; City; St	ate; Zip Code				
	Dallas, TX 75224					
Principal occu	L pation / Job title (See Instructions	;)	Employer (See Instructions	<u> </u> ;)		
ECM Counsi		,	Databank IMX	,		
Date	Full name of contributor	out-of-state PAC (ID#:_)	An	nount of Contribution (\$)	
07/23/2024	Forsyth, Thomas					\$50.00
	Contributor address; City; St	tate; Zip Code				
	Dallas, TX 75224					
	pation / Job title (See Instructions	;)	Employer (See Instructions	5)		
ECM Counsi			Databank IMX	-		
Date	Full name of contributor	out-of-state PAC (ID#:_)	An	nount of Contribution (\$)	
07/28/2024						\$50.00
	Contributor address; City; St	ate; Zip Code				
	Dallas, TX 75224					
Princinal occu	pation / Job title (See Instructions		Employer (See Instructions	<u> </u> ו)		
ECM Counsi		')	Databank IMX	"		

Stonewall Democrats of Dallas PAC 00053855					
Stonewall Democrats of Dallas PAC 00053855 4 Date 5 Full name of contributor out-state PAC (IDI*	The Instru	ction Guide explains how to complete this f	orm.		
Stonewall Democrats of Dallas PAC 00053855 4 Date 5 Full name of contributor out-state PAC (IDI*	2 FILER NAME			3 Filer ID (Ethics Commission File	ers)
08/23/2024 Foy, Morgan S35.00 6 Contributor address; City; State; Zip Code Simple Code Dallas, TX 75202 9 Employer (See Instructions) Director of Planning Out-of-state PAC (DB): Amount of Contribution (\$) Obj12/2024 Full name of contributor out-of-state PAC (DB): Amount of Contribution (\$) Obj12/2024 Garcia M.D., Catalina S35.00 Contributor address; City; State; Zip Code Dallas, TX 75231 Employer (See Instructions) Date Garner, Russell Contributor address; City; State; Zip Code Amount of Contribution (\$) 09/08/2024 Full name of contributor out-of-state PAC (DB): Amount of Contribution (\$) 09/08/2024 Full name of contributor out-of-state PAC (DB): Amount of Contribution (\$) 08/02/2024 Full name of contributor put-of-state PAC (DB): Palomar Modular Building Date Obj08/20224 Full name of contributor put-of-state PAC (DB): Amount of Contribution (\$) 08/02/2024 Full name of contributor put-of-state PAC (DB): Employer (See Instructions) S35.00 Date Full name of contributor put-of-state PAC (DB): <t< td=""><td></td><td></td><td></td><td></td><td></td></t<>					
6 Contributor address; City; State; Zip Code Dallas, TX 75202 Principal occupation / Job title (See Instructions) Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (Der	4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
6 Contributor address; City; State; Zip Code Dallas, TX 75202 9 Employer (See Instructions) Director of Planning Out of state PAC (DB:	08/23/2024			\$	35.00
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 08/12/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 08/12/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 08/12/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 09/08/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 09/08/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 09/08/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 08/02/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 08/02/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 08/02/2024 Full name of contributor out-of-state PAC (Der) Amount of Contr					
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 08/12/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 08/12/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 08/12/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 09/08/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 09/08/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 09/08/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 08/02/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 08/02/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) 08/02/2024 Full name of contributor out-of-state PAC (Der) Amount of Contr					
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		Garland, TX 75044			
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	Accountant		Self		

	The Instru	ction Guide explains how to complete this fo		1	Total pages Schedule A1: Sch: 7/20 Rpt: 29/53	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Stonewall De	emocrats of Dallas PAC			00053855	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/01/2024	Ginsberg, Elizabeth				\$250.00
		6 Contributor address; City; State; Zip Code				
		1				
		Dallas, TX 75230				
8	Principal occu Attorney	ipation / Job title (See Instructions)	9 Employer (See Instructions) Self-Employed	,)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/15/2024	Gomez, Art				\$15.00
		Contributor address; City; State; Zip Code				
		Dallas, TX 75228				
┝	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
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F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/18/2024	Gonzalez, Javan				\$35.00
		Contributor address; City; State; Zip Code				
		1				
		Dallas, TX 75219				
		pation / Job title (See Instructions)	Employer (See Instructions)	.)		
	Marketing		City of Mesquite			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/28/2024	Goodrick, Charisa				\$28.00
		Contributor address; City; State; Zip Code				
		1				
		Dallag TV 75206				
┡	Dringinal occi	Dallas, TX 75206 Ipation / Job title (See Instructions)	Employer (See Instructions	Ľ		
	Ρπτοιραί στου	Jalion / Job lile (See instructions)	Employer (See Instructions))		
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/28/2024	Goodrick, Charisa				\$28.00
		Contributor address; City; State; Zip Code				
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		Dallas, TX 75206				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	()		
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The Instru	ction Guide explains how to complete th	iis form.	1 Total pages Schedule A1: Sch: 8/20 Rpt: 30/53
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	emocrats of Dallas PAC		00053855
4 Date	5 Full name of contributor out-of-state PAC ((ID#:)	7 Amount of Contribution (\$)
09/15/2024	Hall, Summer		\$25.00
	6 Contributor address; City; State; Zip Code		
	Arlington, TX 76002		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	s)
Teacher		Texas Education	
Date	Full name of contributor Out-of-state PAC ((ID#:)	Amount of Contribution (\$)
09/22/2024	Havran, James		\$35.00
	Dallas, TX 75219		
Principal occu	I pation / Job title (See Instructions)	Employer (See Instruction	s)
	nue Accountant	Signify Health	
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of Contribution (\$)
09/05/2024	Henry, Louis	ID#)	\$35.00
03/03/2024	-		
	Contributor address; City; State; Zip Code		
	Dallas, TX 75228		
Principal occu	I pation / Job title (See Instructions)	Employer (See Instruction	s)
Retired		Retired	
Date	Full name of contributor out-of-state PAC ((ID#:)	Amount of Contribution (\$)
07/20/2024	Hess, Susie		\$150.00
	Contributor address; City; State; Zip Code		
	Mesquite, TX 75181		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	s)
Insurance		Marsh USA, Inc	
Date	Full name of contributor 🔲 out-of-state PAC ((ID#:)	Amount of Contribution (\$)
07/29/2024	Hess, Susie		\$150.00
	Contributor address; City; State; Zip Code		
	Mesquite, TX 75181		
Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	s)
Insurance		Marsh USA, Inc	

2 FILER NAME Stonewall Democrats of Dallas PAC 3 Filer ID (Ethics Commission Filers) 00053855 4 Date 09/25/2024 5 Full name of contributor
4 Date 09/25/2024 5 Full name of contributor out-of-state PAC (ID#:) Hess, Susie 7 Amount of Contribution (\$) \$125.00 6 Contributor address; City; State; Zip Code * 7 Amount of Contribution (\$) \$125.00 8 Principal occupation / Job title (See Instructions) Insurance 9 Employer (See Instructions) Marsh USA, Inc * Date 09/25/2024 Full name of contributor out-of-state PAC (ID#:) Heuring, Scott Amount of Contribution (\$) Contributor address; City; State; Zip Code * 9 Fincipal occupation / Job title (See Instructions) Cocupation / Job title (See Instructions) Occupation / Job title (See Instructions) Occupation / Job title (See Instructions) Occupation / Job title (See Instructions) Contributor address; City; State; Zip Code Employer (See Instructions) Four Square Health Date 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Hill, Todd Amount of Contribution (\$) S25.00 Or/25/2024 Full name of contributor out-of-state PAC (ID#:) Hill, Todd Amount of Contribution (\$) S25.00 Principal occupation / Job title (See Instructions) Dallas, TX 75208 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Onload ress; City; State; Zip Code Amount of Contribution (\$) S25.00
09/25/2024 Hess, Susie \$125.00 6 Contributor address; City; State; Zip Code \$125.00 8 Principal occupation / Job title (See Instructions) Insurance 9 Employer (See Instructions) Marsh USA, Inc Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Occupational Therapist Employer (See Instructions) Four Square Health Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Hill, Todd out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Hill, Todd contributor address; City; State; Zip Code Amount of Contribution (\$) Dallas, TX 75208 Employer (See Instructions) S25.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Dallas, TX 75208 Employer (See Instructions)
• Contributor address; City; State; Zip Code Mesquite, TX 75181 • Principal occupation / Job title (See Instructions) Insurance • Employer (See Instructions) Marsh USA, Inc Date Full name of contributor
6 Contributor address; City; State; Zip Code Mesquite, TX 75181 9 8 Principal occupation / Job title (See Instructions) Insurance 9 Employer (See Instructions) Marsh USA, Inc Date Full name of contributor out-of-state PAC (ID#:) Heuring, Scott Amount of Contribution (\$) 09/25/2024 Full name of contributor out-of-state PAC (ID#:) Dallas, TX 75235 Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Occupational Therapist Employer (See Instructions) Four Square Health Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$25.00 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$25.00 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$25.00 07/25/2024 Full name of contributor tou-of-state PAC (ID#:) Amount of Contribution (\$) \$25.00 Date Full name of contributor tou-of-state PAC (ID#:) Amount of Contribution (\$) \$25.00 Date Full name of contributor
8 Principal occupation / Job title (See Instructions) Insurance 9 Employer (See Instructions) Marsh USA, Inc Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/25/2024 Heuring, Scott Contributor address; City; State; Zip Code Amount of Contribution (\$) Dallas, TX 75235 Dallas, TX 75235 Employer (See Instructions) Principal occupation / Job title (See Instructions) Occupational Therapist Employer (See Instructions) Four Square Health Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 0allas, TX 75208 Dallas, TX 75208 Employer (See Instructions) Employer (See Instructions)
8 Principal occupation / Job title (See Instructions) Insurance 9 Employer (See Instructions) Marsh USA, Inc Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/25/2024 Heuring, Scott Contributor address; City; State; Zip Code Amount of Contribution (\$) Dallas, TX 75235 Dallas, TX 75235 Employer (See Instructions) Principal occupation / Job title (See Instructions) Occupational Therapist Employer (See Instructions) Four Square Health Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 0allas, TX 75208 Dallas, TX 75208 Employer (See Instructions) Employer (See Instructions)
8 Principal occupation / Job title (See Instructions) Insurance 9 Employer (See Instructions) Marsh USA, Inc Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/25/2024 Heuring, Scott Contributor address; City; State; Zip Code Amount of Contribution (\$) Dallas, TX 75235 Dallas, TX 75235 Employer (See Instructions) Principal occupation / Job title (See Instructions) Occupational Therapist Employer (See Instructions) Four Square Health Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 0allas, TX 75208 Dallas, TX 75208 Employer (See Instructions) Employer (See Instructions)
Insurance Marsh USA, Inc Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/25/2024 Heuring, Scott Contributor address; City; State; Zip Code Amount of Contribution (\$) Contributor address; City; State; Zip Code Dallas, TX 75235 Employer (See Instructions) Same and the contributor Occupational Therapist Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 0allas, TX 75208 Dallas, TX 75208 Employer (See Instructions)
09/25/2024 Heuring, Scott \$35.00 Contributor address; City; State; Zip Code Dallas, TX 75235 Principal occutor / Job title (See Instructions) Employer (See Instructions) Occupational Full name of contributor Date Full name of contributor 07/25/2024 Full name of contributor Units Out-of-state PAC (ID#:) Amount of Contribution (\$) \$25.00 O7/25/2024 Hill, Todd Date Full name of contributor O2/25/2024 Out-of-state PAC (ID#:) Amount of Contribution (\$) \$25.00 Date Dallas, TX 75208 Principal occutor / Job title (See Instructions) Employer (See Instructions)
Contributor address; City; State; Zip Code Dallas, TX 75235 Principal occupation / Job title (See Instructions) Occupational Therapist Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Hill, Todd Contributor address; City; State; Zip Code Dallas, TX 75208 Principal occupation / Job title (See Instructions) Dallas, TX 75208 Employer (See Instructions) Employer (See Instructions)
Contributor address; City; State; Zip Code Dallas, TX 75235 Principal occupation / Job title (See Instructions) Employer (See Instructions) Occupational Therapist Four Square Health Date Full name of contributor out-of-state PAC (ID#:) 07/25/2024 Hill, Todd Amount of Contribution (\$) °Contributor address; City; State; Zip Code Amount of Contribution (\$) Dallas, TX 75208 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Occupational Therapist Four Square Health Date Full name of contributor out-of-state PAC (ID#:) 07/25/2024 Hill, Todd \$25.00 Contributor address; City; State; Zip Code Dallas, TX 75208 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions)
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Principal occupation / Job title (See Instructions) Employer (See Instructions) Occupational Therapist Four Square Health Date Full name of contributor out-of-state PAC (ID#:) 07/25/2024 Hill, Todd \$25.00 Contributor address; City; State; Zip Code Dallas, TX 75208 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions)
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Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/25/2024 Hill, Todd \$25.00 Contributor address; City; State; Zip Code Dallas, TX 75208 Principal occupation / Job title (See Instructions) Employer (See Instructions)
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Contributor address; City; State; Zip Code Dallas, TX 75208 Principal occupation / Job title (See Instructions) Employer (See Instructions)
Dallas, TX 75208 Principal occupation / Job title (See Instructions) Employer (See Instructions)
Principal occupation / Job title (See Instructions) Employer (See Instructions)
Principal occupation / Job title (See Instructions) Employer (See Instructions)
Principal occupation / Job title (See Instructions) Employer (See Instructions)
Sr. Policy Program Manager Urban Institute
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
09/20/2024 Hill, Todd \$125.00
Contributor address; City; State; Zip Code
Dallas, TX 75208
Principal occupation / Job title (See Instructions) Employer (See Instructions)
Sr. Policy Program Manager Urban Institute
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
08/02/2024 Horkan, Kelly \$32.00
Contributor address; City; State; Zip Code
North Richland Hills, TX 76182
North Richland Hills, TX 76182 Principal occupation / Job title (See Instructions) Employer (See Instructions)

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 10/20 Rpt: 32/53
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	emocrats of Dallas PAC		00053855
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
08/21/2024	Huff, Douglas		\$35.00
	6 Contributor address; City; State; Zip Code		
	Garland, TX 75043		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/17/2024	Jasso, Juan		\$35.00
	Contributor address; City; State; Zip Code		
	Red Oak, TX 75154		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)
JP		Dallas CO	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/14/2024	Jones, DaSean		\$100.00
	Contributor address; City; State; Zip Code		
	-		
	Houston, TX 77002		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
Judge		State of TX	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/05/2024	Kimball, Kellye		\$35.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75218		
	pation / Job title (See Instructions)	Employer (See Instructions))
Graphic Des	igner	Self-Employed	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/02/2024	Langhi, Steven		\$60.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75220		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))
Retired			

The Instruct	ion Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 11/20 Rpt: 33/53	
2 FILER NAME			3 Filer ID (Ethics Commission Filer	rs)
	nocrats of Dallas PAC		00053855	,
4 Date 5	Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
09/05/2024	Leal, Chris		\$3	35.00
6	Contributor address; City; State; Zip Code			
	Dallas, TX 75202			
8 Principal occupa	ation / Job title (See Instructions)	9 Employer (See Instructions)	
Executive Dire	ector	Dallas County Democra	tic Party	
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/24/2024	Lewis, MIchael	/		35.00
				00100
	Contributor address, City, State, Zip Code			
	Dallas, TX 75219			
Principal occupa	ation / Job title (See Instructions)	Employer (See Instructions	()	
Rabbi		Temple Emanuel)	
		-		
Date)	Amount of Contribution (\$)	05 00
07/15/2024	Little, Tiffany		\$2	25.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75224			
	ation / Job title (See Instructions)	Employer (See Instructions	,	
Reporting Spe	cialist	City Electric Supply Con	npany	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
08/15/2024	Little, Tiffany		\$2	25.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75224			
Principal occupa	ation / Job title (See Instructions)	Employer (See Instructions)	
Reporting Spe	cialist	City Electric Supply Con	npany	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/15/2024	Little, Tiffany			25.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75224			
Principal occupa	ation / Job title (See Instructions)	Employer (See Instructions))	
Reporting Spe		City Electric Supply Con		
			-	

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 12/20 Rpt: 34/53	
2 FILER NAME			3 Filer ID (Ethics Commission Filers	s)
	emocrats of Dallas PAC		00053855	,
4 Date	5 Full name of contributor Out-of-state PAC (ID#	ŧ:)	7 Amount of Contribution (\$)	
07/28/2024			\$1	L0.00
	6 Contributor address; City; State; Zip Code			
	Dallas, TX 75235			
	upation / Job title (See Instructions)	9 Employer (See Instructions)	;)	
Union Staff F	Rep	CWA		
Date	Full name of contributor out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	
08/28/2024	Lo Vuolo, Michael		\$1	L0.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75235			
	upation / Job title (See Instructions)	Employer (See Instructions))	
Union Staff F	Rep	CWA		
Date	Full name of contributor out-of-state PAC (ID#	÷)	Amount of Contribution (\$)	
09/07/2024	Magnis, Ellen		\$12	20.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75243			
	upation / Job title (See Instructions)	Employer (See Instructions)	;)	
Executive		Family Gateway		
Date	Full name of contributor Out-of-state PAC (ID#	t:)	Amount of Contribution (\$)	
09/08/2024	Maline, John		\$12	20.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75225			
	upation / Job title (See Instructions)	Employer (See Instructions)	;)	
Software De	veloper	Texas Instruments		
Date	Full name of contributor out-of-state PAC (ID#	:)	Amount of Contribution (\$)	
09/15/2024	McClain, Lauren		\$6	60.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75209			
	upation / Job title (See Instructions)	Employer (See Instructions)		
Lawyer		The Law Office of Laure	n The Lawyer	

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 13/20 Rpt: 35/53
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Stonewall Democrats of Dallas PAC	00053855
4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$)
08/02/2024 McGee, Susan	\$28.00
6 Contributor address; City; State; Zip Code	
Garland, TX 75043	
8 Principal occupation / Job title (See Instructions) 9 Employer	(See Instructions)
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
08/02/2024 McGee, Susan	\$28.00
Contributor address; City; State; Zip Code	
Garland, TX 75043	
Principal occupation / Job title (See Instructions) Employer	(See Instructions)
Date Full name of contributor out-of-state PAC (ID#:	
09/17/2024 Melendez, Carlos	\$35.00
Contributor address; City; State; Zip Code	
Dallas, TX 75219	
	See Instructions)
Accountant Trimont	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
07/29/2024 Mendoza, J.R.	\$25.00
Contributor address; City; State; Zip Code	
Dallas, TX 75254	
	(See Instructions)
Teacher Irving ISE	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
09/23/2024 Merritt, Stephen	\$20.00
Contributor address; City; State; Zip Code	
Grapevine, TX 76051	
	See Instructions)
Financial Advisor Empower	

The Instru	ction Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 14/20 Rpt: 36/53	
2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
Stonewall De	emocrats of Dallas PAC			00053855	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
07/29/2024	Moyé, Eric (Judge)				\$120.00
	6 Contributor address; City; State; Zip Code		1		
	Dallas, TX 75202				
8 Principal occu Judge	ipation / Job title (See Instructions)	9 Employer (See Instructions State of Texas	3)		
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
07/11/2024	O'Neal, Keith Michael				\$35.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75235	· · · · · · · · ·			
-	Ipation / Job title (See Instructions)	Employer (See Instructions	5)		
Assistant Tre		Hunt Consolidated Inc	, 		
Date	Full name of contributor out-of-state PAC (ID#:)]	Amount of Contribution (\$)	
08/11/2024	O'Neal, Keith Michael				\$25.00
	Contributor address; City; State; Zip Code				
	Dallas, TX 75235				
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	د) ا		
Assistant Tre		Hunt Consolidated Inc	5)		
			—	Amount of Contribution (\$)	
Date 09/11/2024	Full name of contributor out-of-state PAC (ID#: O'Neal, Keith Michael)		Amount of Contribution (\$)	\$25.00
03/11/2024					φ20.00
	Contributor address; City; State; Zip Code				
	Dallas, TX 75235				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Assistant Tre	easurer	Hunt Consolidated Inc			
Date	Full name of contributor out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
07/31/2024	Olivarez, Javier				\$50.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75219				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	3)		

Stonewall Democrats of Dallas PAC 00053855 4 Date 5 08/31/2024 5 00053855 7 00053855 Amount of Contribution (\$) 00053855 5 00053855 7 00053855 Amount of Contribution (\$) 00053855 5 00053855 7 00053855 Amount of Contribution (\$) 00053855 5 00053855 5 00053855 6 <td< th=""><th>Instruction Guide explains how to complete this form. Sch: 15/20 Rpt: 37/53 R NAME 3 Filer ID (Ethics Commission Filers) 00053855 iewall Democrats of Dallas PAC 0 out-of-state PAC (ID#:) Olivarez, Javier 7 Amount of Contribution (\$) \$35.00 1/2024 5 Full name of contributor out-of-state PAC (ID#:) Olivarez, Javier 7 Amount of Contribution (\$) \$35.00 ipal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) \$60.00 0/2024 Full name of contributor out-of-state PAC (ID#:) Dallas, TX 75219 Amount of Contribution (\$) \$60.00 0/2024 Full name of contributor out-of-state PAC (ID#:) Partida-Kipness, Robbie (Judge) Amount of Contribution (\$) \$60.00 0/2024 Full name of contributor out-of-state PAC (ID#:) Fifth Court of Appeals Amount of Contribution (\$) \$35.00 1/2024 Full name of contributor out-of-state PAC (ID#:) Full name of contributor address; City, State; Zip Code Amount of Contribution (\$) \$35.00 ipal occupation / Job title (See Instructions) Contributor address; City, State; Zip Code Amount of Contribution (\$) \$35.00 ipal occupation / Job title (See Instructions) Contributor address; City, State; Zip Code Amount of Contribution (\$) \$35.00 ipal occupation / Job title (See Instructions) Dallas, T</th><th>The Instruction Guide explains how to complete this form. Sch: 15/20 Rpt: 37/53 2 FILER NAME 3 File rID (Ethics Commission Filers) Stonewall Democrats of Dallas PAC 3 File rID (Ethics Commission Filers) 4 Date 5 Full name of contributor out-of-state PAC (D#:</th><th></th><th></th><th></th><th></th><th></th></td<>	Instruction Guide explains how to complete this form. Sch: 15/20 Rpt: 37/53 R NAME 3 Filer ID (Ethics Commission Filers) 00053855 iewall Democrats of Dallas PAC 0 out-of-state PAC (ID#:) Olivarez, Javier 7 Amount of Contribution (\$) \$35.00 1/2024 5 Full name of contributor out-of-state PAC (ID#:) Olivarez, Javier 7 Amount of Contribution (\$) \$35.00 ipal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) \$60.00 0/2024 Full name of contributor out-of-state PAC (ID#:) Dallas, TX 75219 Amount of Contribution (\$) \$60.00 0/2024 Full name of contributor out-of-state PAC (ID#:) Partida-Kipness, Robbie (Judge) Amount of Contribution (\$) \$60.00 0/2024 Full name of contributor out-of-state PAC (ID#:) Fifth Court of Appeals Amount of Contribution (\$) \$35.00 1/2024 Full name of contributor out-of-state PAC (ID#:) Full name of contributor address; City, State; Zip Code Amount of Contribution (\$) \$35.00 ipal occupation / Job title (See Instructions) Contributor address; City, State; Zip Code Amount of Contribution (\$) \$35.00 ipal occupation / Job title (See Instructions) Contributor address; City, State; Zip Code Amount of Contribution (\$) \$35.00 ipal occupation / Job title (See Instructions) Dallas, T	The Instruction Guide explains how to complete this form. Sch: 15/20 Rpt: 37/53 2 FILER NAME 3 File rID (Ethics Commission Filers) Stonewall Democrats of Dallas PAC 3 File rID (Ethics Commission Filers) 4 Date 5 Full name of contributor out-of-state PAC (D#:					
2 FILER NAME Stonewall Democrats of Dallas PAC 3 Filer ID (Ethics Commission Filer 00053855 4 Date 08/31/2024 5 Full name of contributor out-of-state PAC (ID#:) Olivarez, Javier 7 Amount of Contribution (\$) 6 Contributor address; City; State; Zip Code 5 Employer (See Instructions) 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) 09/20/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$6 09/20/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$6 09/20/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$6 09/20/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$6 0allas, TX 75244 Dallas, TX 75244 Employer (See Instructions) Employer (See Instructions) Fifth Court of Appeals	R NAME 3 Filer ID (Ethics Commission Filers) 00053855 1/2024 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) 1/2024 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) ipal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) 0/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 0/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 0/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) ipal occupation / Job title (See Instructions) Employer (See Instructions) \$60.00 Contributor address; City; State; Zip Code Fifth Court of Appeals \$60.00 1/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 1/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) ipal occupation / Job title (See Instructions) Employer (See Instructions) \$35.00 ipal occupation / Job title (See Instructio	2 FILER NAME 3 Filer ID (Elitics Commission Filers) 3 Filer ID (Elitics Commission Filers) 00053855 4 Date Olivare a contributor out of state PAC (Der) 7 Amount of Contribution (\$) 0/0312/2021 6 Commission Filers) 9 Employer (See Instructions) 7 Amount of Contribution (\$) 0/0312/2021 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) \$60.00 Date Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) \$60.00 09/20/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) \$60.00 Date Date Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) \$35.00 08/21/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) \$35.00 08/21/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$) \$35.00 09/20/2024 Full name of contributor out-of-state PAC (Der) Amount of Contribution (\$)	The Instru	The Instruction Guide explains how to complete this form.			
Stonewall Devocats of Dallas PAC 00053855 4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7 Amount of Contribution (\$) 08/31/2024 6 Contributor address; City; State; Zip Code 7 Amount of Contribution (\$) \$3 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) 09/20/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/20/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/20/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/20/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/20/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/20/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/20/2024 Partida-Kipness, Robbie (Judge) Contributor address; City; State; Zip Code Amount of Contributor 09/20/2024 Dallas, TX 75244 Employer (See	ewall Democrats of Dallas PAC 00053855 S Full name of contributor □ out-of-state PAC (D#:) Olivarez, Javier 7 Amount of Contribution (\$) (\$ Contributor address; City; State; Zip Code B Dallas, TX 75219 9 Employer (See Instructions) A mount of Contribution (\$) D /2024 F ull name of contributor □ out-of-state PAC (D#:) A mount of Contribution (\$) D /2024 F ull name of contributor □ out-of-state PAC (D#:) A mount of Contribution (\$) D /2024 F ull name of contributor □ out-of-state PAC (D#:) A mount of Contribution (\$) D /2024 F ull name of contributor □ out-of-state PAC (D#:) A mount of Contribution (\$) i pal occupation / Job title (See Instructions) E mployer (See Instructions) A mount of Contribution (\$) 1 /2024 Full name of contributor o ut-of-state PAC (D#:) A mount of Contribution (\$) 1 /2024 Full name of contributor o ut-of-state PAC (D#:)	Stonewall Democrats of Dallas PAC 00053855 4 Date 5 Full name of contributor	2 FILER NAME			-	n Filers)
08/31/2024 Olivarez, Javier \$3 6 Contributor address; City; State; Zip Code 5 Dallas, TX 75219 Dallas, TX 75219 8 Principal occupation / Job title (See Instructions) 9 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Partida-Kipness, Robbie (Judge) Amount of Contribution (\$) 09/20/2024 Partida-Kipness; City; State; Zip Code Amount of Contribution (\$) Dallas, TX 75244 Dallas, TX 75244 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Justice Fifth Court of Appeals	1/2024 Olivarez, Javier \$35.00 6 Contributor address; City; State; Zip Code \$35.00 ipal occupation / Job title (See Instructions) 9 Employer (See Instructions) 0/2024 Full name of contributor out-of-state PAC (D#:) Amount of Contributor address; City; State; Zip Code Amount of Contribution (\$) 0/2024 Full name of contributor out-of-state PAC (D#:) 1/2024 Full name of contributors; Employer (See Instructions) ipal occupation / Job title (See Instructions) Employer (See Instructions) ipal occupation / Job title (See Instructions) Employer (See Instructions) ipal occupation / Job title (See Instructions) Employer (See Instructions) ipal occupation / Job title (See Instructions) Employer (See Instructions) ipal occupation / Job title (08/31/2024 Olivarez, Javier \$35.00 6 Contributior address; City; State; Zip Code Second 7 Dallas, TX 75219 9 Employer (See Instructions) 9 Particla-Kipness, Robbie (Judge) Amount of Contribution (\$) \$60.00 09/20/2024 Particla-Kipness, Robbie (Judge) Amount of Contribution (\$) \$60.00 09/20/2024 Particla-Kipness, Robbie (Judge) Amount of Contribution (\$) \$60.00 Contributor address; City; State; Zip Code Dallas, TX 75244 Amount of Contribution (\$) \$60.00 08/21/2024 Full name of contributor out-i-state PAC (Dor:					11 110.2,
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Attorney Liberty Mutual Group	ipal occupation / Job title (See Instructions) Employer (See Instructions)	Contributor address; City; State; Zip Code Dallas, TX 75218 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Date	Full name of contributor out-of-state PAC (ID#:	:)	Amount of Contribution (\$)	
	ipal occupation / Job title (See Instructions) rney Employer (See Instructions) Liberty Mutual Group	Dallas, TX 75218 Principal occupation / Job title (See Instructions) Employer (See Instructions)	09/08/2024	Pomykal, Keith			\$250.0
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	ipal occupation / Job title (See Instructions) Employer (See Instructions) rney Liberty Mutual Group Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code			
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$25	ipal occupation / Job title (See Instructions) Employer (See Instructions) rney Employer (See Instructions) Liberty Mutual Group Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 8/2024 Pomykal, Keith \$250.00	Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$25	ipal occupation / Job title (See Instructions) rney Full name of contributor Pomykal, Keith Employer (See Instructions) Liberty Mutual Group Amount of Contribution (\$) \$250.00	Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$25 Contributor address; City; State; Zip Code \$25	ipal occupation / Job title (See Instructions) rney Employer (See Instructions) Liberty Mutual Group Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 8/2024 Pomykal, Keith Contributor address; City; State; Zip Code						
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$25 Contributor address; City; State; Zip Code Dallas, TX 75218	ipal occupation / Job title (See Instructions) rney Employer (See Instructions) Liberty Mutual Group Amount of Contribution (\$) 8/2024 Pomykal, Keith Contributor address; City; State; Zip Code Dallas, TX 75218	Commercial Real Estate Pomykal LLC)	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$25 Contributor address; City; State; Zip Code \$25 Dallas, TX 75218 Dallas, TX 75218 Principal occupation / Job title (See Instructions) Employer (See Instructions)	ipal occupation / Job title (See Instructions) rney Employer (See Instructions) Liberty Mutual Group 8/2024 Full name of contributor out-of-state PAC (ID#:) Pomykal, Keith Contributor address; City; State; Zip Code Dallas, TX 75218 ipal occupation / Job title (See Instructions) Employer (See Instructions)	•	Commercial	Real Estate	Pomykal LLC		
Dallas, TX 75229		Attorney Liberty Mutual Group Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$250.00 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code \$250.00 Dallas, TX 75218 Dallas, TX 75218 Employer (See Instructions)		Dallas, TX 75229			
Principal occupation / Job title (See Instructions) Employer (See Instructions)	Dallas, TX 75229	Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$250.00 Contributor address; City; State; Zip Code Dallas, TX 75218 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))	
		09/08/2024 Pomykal, Keith \$250.00 Contributor address; City; State; Zip Code Dallas, TX 75218 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Attorney		Liberty Mutual Group		
Attorney Liberty Mutual Group	ipal occupation / Job title (See Instructions) Employer (See Instructions)	Contributor address; City; State; Zip Code Dallas, TX 75218 Principal occupation / Job title (See Instructions) Employer (See Instructions)	Date Full name of contributor out-of-state PAC (ID#:		:)	Amount of Contribution (\$)	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	ipal occupation / Job title (See Instructions) Employer (See Instructions) rney Liberty Mutual Group Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	Dallas, TX 75218 Principal occupation / Job title (See Instructions) Employer (See Instructions)	09/08/2024	Pomykal, Keith			\$250.0
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$25	ipal occupation / Job title (See Instructions) Employer (See Instructions) rney Employer (See Instructions) Liberty Mutual Group Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 8/2024 Pomykal, Keith \$250.00	Principal occupation / Job title (See Instructions) Employer (See Instructions)		Contributor address; City; State; Zip Code			
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$25	ipal occupation / Job title (See Instructions) Employer (See Instructions) rney Employer (See Instructions) Liberty Mutual Group Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 8/2024 Pomykal, Keith \$250.00	Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$25	ipal occupation / Job title (See Instructions) Employer (See Instructions) rney Employer (See Instructions) Liberty Mutual Group Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 8/2024 Pomykal, Keith \$250.00	Principal occupation / Job title (See Instructions) Employer (See Instructions)		Dallas, TX 75218			
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$25 Contributor address; City; State; Zip Code \$25	ipal occupation / Job title (See Instructions) rney Employer (See Instructions) Liberty Mutual Group Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 8/2024 Pomykal, Keith Contributor address; City; State; Zip Code		Principal occu		Employer (See Instructions))	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$25 Contributor address; City; State; Zip Code Dallas, TX 75218	ipal occupation / Job title (See Instructions) rney Full name of contributor out-of-state PAC (ID#:) R/2024 Pomykal, Keith Contributor address; City; State; Zip Code Dallas, TX 75218						
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$25 Contributor address; City; State; Zip Code \$25 Dallas, TX 75218 Employer (See Instructions)	ipal occupation / Job title (See Instructions) rney Employer (See Instructions) Liberty Mutual Group Amount of Contribution (\$) Pomykal, Keith Contributor address; City; State; Zip Code Dallas, TX 75218 ipal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)						
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 09/08/2024 Pomykal, Keith \$25 Contributor address; City; State; Zip Code \$25 Dallas, TX 75218 Employer (See Instructions)	ipal occupation / Job title (See Instructions) rney Employer (See Instructions) Liberty Mutual Group 8/2024 Full name of contributor out-of-state PAC (ID#:) Pomykal, Keith Contributor address; City; State; Zip Code Dallas, TX 75218 ipal occupation / Job title (See Instructions) Employer (See Instructions)						

The Instru	The Instruction Guide explains how to complete this form.			
2 FILER NAME			Sch: 16/20 Rpt: 38/53 3 Filer ID (Ethics Commission	Filers)
	emocrats of Dallas PAC		00053855	1 110.07
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
07/28/2024	Redfern, Debra			\$28.00
	6 Contributor address; City; State; Zip Code			
	Dallas, TX 75243	<u> </u>		
8 Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/08/2024	Reichek, Amanda (Judge)			\$35.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75218			
	ipation / Job title (See Instructions)	Employer (See Instructions))	
Judge		State of Texas		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/20/2024	Ridley, Paul			\$125.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75214			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Attorney/Councilmember Self)		
Date		<u> </u>	Amount of Contribution (\$)	
09/09/2024	Full name of contributor out-of-state PAC (ID#: Robertson, Laura	/		\$35.00
0310312024				Ψ00.00
Contributor address; City; State; Zip Code				
	Dallas, TX 75211			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Pyschotherapist Self-Employed		Self-Employed		
Date	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
08/01/2024	Rosenberg, Barbara			\$28.00
	Contributor address; City; State; Zip Code			
	Dallas, TX 75214			
-	ipation / Job title (See Instructions)	Employer (See Instructions))	
Retired				

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 17/20 Rpt: 39/53
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	emocrats of Dallas PAC		00053855
4 Date	5 Full name of contributor out-of-state PAC (ID#	:)	7 Amount of Contribution (\$)
07/10/2024			\$60.00
	6 Contributor address; City; State; Zip Code		
	Coppell, TX 75019	-	
-	upation / Job title (See Instructions)	9 Employer (See Instructions	;)
Lawyer		Shepard Mullin	
Date	Full name of contributor Out-of-state PAC (ID#	:)	Amount of Contribution (\$)
09/17/2024			\$35.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75248	-	
	upation / Job title (See Instructions)	Employer (See Instructions	
Software D	evelopment Manager	PWC	
Date	Full name of contributor Out-of-state PAC (ID#	:)	Amount of Contribution (\$)
07/31/2024	07/31/2024 Saenz, Martin		\$25.00
	Contributor address; City; State; Zip Code		
	Garland, TX 75043		
Principal occupation / Job title (See Instructions) Employer (See Instruction			
Security Of		Garda World	
Date	Full name of contributor Out-of-state PAC (ID#	:)	Amount of Contribution (\$)
09/20/2024	Sans, Becky		\$40.00
	Contributor address; City; State; Zip Code		
	Garland, TX 75044		
Principal occ	upation / Job title (See Instructions)	Employer (See Instructions	
Date	Full name of contributor Out-of-state PAC (ID#	:)	Amount of Contribution (\$)
08/02/2024 Santos, Renato		\$16.00	
	Contributor address; City; State; Zip Code		
	Duncanville, TX 75137	1	
	upation / Job title (See Instructions)	Employer (See Instructions	
Director		LULAC National Educat	ional Service Centers (LNESC

-	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 18/20 Rpt: 40/53	
2 [ILER NAME			3 Filer ID (Ethics Commission F	-ilers)
		emocrats of Dallas PAC		00053855	
4 [Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
(09/06/2024	Santos, Renato			\$35.00
		6 Contributor address; City; State; Zip Code			
		Duncanville, TX 75137			
8 F	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
1	Director		LULAC National Educati	ional Service Centers (LNESC	
	Date	Full name of contributorout-of-state PAC (ID#:)	Amount of Contribution (\$)	
	09/19/2024	Simon, Yasmin)		\$120.00
	55/15/2024				Ψ120.00
		Contributor address; City; State; Zip Code			
⊢		Dallas, TX 75205			
		pation / Job title (See Instructions)	Employer (See Instructions)	
	Attorney		Morgan Lewis		
[Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
(07/24/2024	Unterberg, Jay			\$25.00
		Contributor address; City; State; Zip Code			
		Dallas, TX 75204			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
Clinical Pyschologist/Pyschoanalyst Self-employed		,			
	_			Amount of Contribution (P)	
	Date Full name of contributor out-of-state PAC (ID#:))	Amount of Contribution (\$)	¢104.00
	08/02/2024 Vance, Brandon				\$104.00
		Contributor address; City; State; Zip Code			
		Dallas, TX 75063			
F	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
	Advocacy M	anager	KIPP Texas		
[Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	08/31/2024	Vanderbilt, Brad			\$35.00
		Contributor address; City; State; Zip Code			
		Farmers Branch, TX 75234			
	Princinal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
'	micipai uccu)	

The Instruc	The Instruction Guide explains how to complete this form.				
2 FILER NAME			3	Filer ID (Ethics Commission	Filers)
Stonewall De	emocrats of Dallas PAC	!		00053855	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
07/25/2024	Walker, Philip	1			\$10.00
	6 Contributor address; City; State; Zip Code		1		
	I	1			
	l l	1			
I	Dallas, TX 75229	·'			
	pation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
Real Estate A	Agent	Keller Williams Realty			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
08/25/2024	Walker, Philip				\$10.00
	Contributor address; City; State; Zip Code	,	1		
		1			
		1			
	Dallas, TX 75229	1			
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Real Estate A	\gent	Keller Williams Realty			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
09/25/2024	Walker, Philip	1			\$10.00
ı İ	Contributor address; City; State; Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1		
1	i	!			
	l l l l l l l l l l l l l l l l l l l	1			
	Dallas, TX 75229				
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Real Estate A	\gent	Keller Williams Realty			
Date	Full name of contributor out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
09/03/2024	Webb, Christopher	!			\$35.00
	Contributor address; City; State; Zip Code		1		
	1	1			
	Dallas, TX 75219	!			
	pation / Job title (See Instructions)	Employer (See Instructions	5)		
Felony Recor	rds Supervisor	Dallas County			
Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
08/02/2024	Whitaker, Sarah	1			\$28.00
	Contributor address; City; State; Zip Code		1		
		1			
		1			
	Terrell, TX 75160				
Principal occup	pation / Job title (See Instructions)	Employer (See Instructions	3)		
l		1			
1					

The Instruction Guide explains how to complete this form. Stine Sch: 20/20 Rpt: 42/53 2 FLER NAME 3 Fler ID (Ethics Commission Filers) Stonewall Democrats of Dallas PAC 00053855 0 Date 5 Full name of contributor
Stonewall Democrats of Dallas PAC 00053855 Date \$ Full name of contributor out-of-state PAC (DE) 7 Amount of Contribution (\$) 09/13/2024 \$ Full name of contributor address; City; State; Zip Code 7 Amount of Contribution (\$) 3 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) 7 Full name of contributor out-of-state PAC (DE) Amount of Contribution (\$) \$35.00 04/2 Full name of contributor out-of-state PAC (DE) Amount of Contribution (\$) \$25.00 07/30/2024 Full name of contributor out-of-state PAC (DE) Amount of Contribution (\$) \$25.00 07/30/2024 Full name of contributor out-of-state PAC (DE) Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$25.00 07/29/2024 Full name of contributor out-of-state PAC (DE
Date 5 Full name of contributor out-of-state PAC (IDE
09/13/2024 Wilkinson, Jack \$35.00 0 Contributor address; City; State; Zip Code \$35.00 3 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (Dei:) Amount of Contribution (\$) \$25.00 07/30/2024 Full name of contributor out-of-state PAC (Dei:) Amount of Contribution (\$) \$25.00 07/30/2024 Terrell, TX 75161 Employer (See Instructions) Dallas ISD Amount of Contribution (\$) \$25.00 07/29/2024 Full name of contributor out-of-state PAC (Dei:) Amount of Contribution (\$) \$25.00 07/29/2024 Full name of contributor out-of-state PAC (Dei:) Amount of Contribution (\$) \$25.00 07/29/2024 Full name of contributor out-of-state PAC (Dei:) Amount of Contribution (\$) \$25.00 08/01/2024 Full name of contributor out-of-state PAC (Dei:) Amount of Contribution (\$) \$28.00 08/01/2024 Full name of contributor out-of-state PAC (Dei:) Amount of Contribution (\$) \$28.00 \$28.00 \$28.00 </td
6 Contributor address; City; State; Zip Code Mesquite, TX 75149 Perincipal occupation / Job title (See Instructions) Retired 3 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date 07/30/2024 Full name of contributor out-of-state PAC (IDF:) Amount of Contribution (\$) S25.00 Terrell, TX 75161 Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Teacher/Pyschologist Employer (See Instructions) Dallas ISD Amount of Contribution (\$) Date 07/29/2024 Full name of contributor out-of-state PAC (IDF:) Amount of Contribution (\$) Date 07/29/2024 Full name of contributor out-of-state PAC (IDF:) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) 08/01/2024 Full name of contributor out-of-state PAC (IDF:
6 Contributor address; City; State; Zip Code Mesquite, TX 75149 9 3 Principal occupation / Job title (See Instructions) Retired 9 Date 07/30/2024 Full name of contributor out-of-state PAC (ID#
3 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date 07/30/2024 Full name of contributor out-of-state PAC (ID#:) Contributor address; City; State; Zip Code Amount of Contribution (\$) \$25.00 Date 07/30/2024 Full name of contributor Terrell, TX 75161 Employer (See Instructions) Dallas ISD \$25.00 Date 07/29/2024 Full name of contributor Williamson, Mike Contributor address; City; State; Zip Code Amount of Contribution (\$) \$25.00 Date 07/29/2024 Full name of contributor Contributor address; City; State; Zip Code Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Employer (See Instructions) \$25.00 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) \$25.00 Date 08/01/2024 Full name of contributor Dallas, TX 75219 Employer (See Instructions) \$28.00 Orritobutor address; City; State; Zip Code Dallas, TX 75240 Amount of Contribution (\$) \$28.00 \$28.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$28.00 Date Full name of contributor
3 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Retired Date 07/30/2024 Full name of contributor out-of-state PAC (ID#:) Contributor address; City; State; Zip Code Amount of Contribution (\$) \$25.00 Date 07/30/2024 Full name of contributor Terrell, TX 75161 Employer (See Instructions) Dallas ISD \$25.00 Date 07/29/2024 Full name of contributor out-of-state PAC (ID#:) Williamson, Mike Contributor address; City; State; Zip Code Amount of Contribution (\$) \$25.00 Date 07/29/2024 Full name of contributor out-of-state PAC (ID#:) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (\$) \$25.00 Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Employer (See Instructions) \$25.00 Date 08/01/2024 Full name of contributor out-of-state PAC (ID#:) Mills, Laura Contributor address; City; State; Zip Code Amount of Contribution (\$) \$28.00 \$28.00 Date 08/01/2024 Full name of contributor Contributor address; City; State; Zip Code Amount of Contribution (\$) \$28.00 \$28.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$28.00 Date Full name of contributor Out-of-state PAC (ID#:
Retired Retired Date 07/30/2024 Full name of contributor
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/30/2024 Williams, Martha \$25,00 Ordination of Contributor address; City; State; Zip Code Terrell, TX 75161 \$25,00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Teacher/Pyschologist Dallas ISD Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/29/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$25,00 Retired Dallas, TX 75219 Amount of Contribution (\$) \$28,00 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) \$28,00 Oallas, TX 75240 Contributor address; City; State; Zip Code Amount of Contribution (\$) \$28,00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$28,00 Contributor address; City; State; Zip Code Dallas, TX 75240 Amount of Contribution (\$) Principal occup
07/30/2024 Williams, Martha \$25.00 Contributor address; City, State; Zip Code Furrell, TX 75161 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 07/29/2024 Williamson, Mike \$25.00 07/29/2024 Williamson, Mike \$25.00 07/29/2024 Williamson, Mike \$25.00 Contributor address; City, State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#:
Contributor address; City; State; Zip Code Terrell, TX 75161 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:
Contributor address; City; State; Zip Code Terrell, TX 75161 Principal occupation / Job title (See Instructions) Employer (See Instructions) Teacher/Pyschologist Dallas ISD Date Full name of contributor
Principal occupation / Job title (See Instructions) Teacher/Pyschologist Employer (See Instructions) Dallas ISD Date Full name of contributor
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Principal occupation / Job title (See Instructions) Teacher/Pyschologist Employer (See Instructions) Dallas ISD Date Full name of contributor
Teacher/Pyschologist Dallas ISD Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/29/2024 Williamson, Mike \$25.00 Contributor address; City; State; Zip Code Dallas, TX 75219 \$25.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$25.00 Retired Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/01/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/01/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/01/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Employer (See Instructions) \$28.00 Ontributor address; City; State; Zip Code Dallas, TX 75240 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 07/29/2024 Williamson, Mike \$25.00 Contributor address; City; State; Zip Code \$25.00 Date Daltas, TX 75219 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Vills, Laura 08/01/2024 Full name of contributor Vills, Laura Contributor address; City; State; Zip Code Date Full name of contributor 08/01/2024 Wills, Laura Dallas, TX 75240 \$28.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution address; City; State; Zip Code S28.00 Dallas, TX 75240 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Amount of Contribution (\$)
07/29/2024 Williamson, Mike \$25.00 Contributor address; City; State; Zip Code
Contributor address; City; State; Zip Code Dallas, TX 75219 Principal occupation / Job title (See Instructions) Retired Date Full name of contributor 08/01/2024 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code Dallas, TX 75240 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) State; Zip Code Dallas, TX 75240 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$)
Dallas, TX 75219 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Full name of contributor out-of-state PAC (ID#:) Date Full name of contributor address; City; State; Zip Code Amount of Contribution (\$) Dallas, TX 75240 Employer (See Instructions) \$28.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$28.00 Dallas, TX 75240 Employer (See Instructions) \$20 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 08/01/2024 Wills, Laura \$28.00 Contributor address; City; State; Zip Code See Instructions) Dallas, TX 75240 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor Employer (See Instructions) \$28.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$28.00 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Retired Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) 08/01/2024 Wills, Laura \$28.00 Contributor address; City; State; Zip Code See Instructions) Dallas, TX 75240 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contributor Employer (See Instructions) \$28.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$28.00 Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) 08/01/2024 Wills, Laura \$28.00 Contributor address; City; State; Zip Code \$28.00 Dallas, TX 75240 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/01/2024 Wills, Laura \$28.00 Contributor address; City; State; Zip Code Dallas, TX 75240 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Date Full name of contributor out-of-state PAC (ID#:)
08/01/2024 Wills, Laura \$28.00 Contributor address; City; State; Zip Code Dallas, TX 75240 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Contributor address; City; State; Zip Code Dallas, TX 75240 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Dallas, TX 75240 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$)
07/12/2024 Wintin, Zachary \$35.00
Contributor address; City; State; Zip Code
Irving, TX 75062
Principal occupation / Job title (See Instructions) Employer (See Instructions)
EXNIDIT Sales Manager
Exhibit Sales Manager Shepard

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District - Gift/Awards/Memorials Expense Printing Expense Travel Out of District
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/11 Rpt: 43/53	Stonewall Democrats of Dallas PAC 00053855
4 Date 09/05/2024	5 Payee name AFL-CIO
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$350.00	1408 N Washington Ave #240
Expenditure from corporate funds	Dallas, TX 75204
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Labor Day Breakfast sponsorship.
	Labor Day Broanast sponsorship.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/10/2024	American National Bank of Texas
Amount (\$)	Payee address; City; State; Zip Code
\$193.78	2703 Oak Lawn Ave
Expenditure from corporate funds	Dallas, TX 75219
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
08/01/2024	American National Bank of Texas
Amount (\$)	Payee address; City; State; Zip Code
\$192.16	2703 Oak Lawn Ave
Expenditure from corporate funds	Dallas, TX 75219
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank fees.
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Ex / - Gift/Awards/Memorials Expense Printing E	ayment/Reimbursement Solici rrhead/Rental Expense Trans pense Trave xpense Trave /ages/Contract Labor OTHE	tation/Fundraising Expense portation Equipment & Related Expense I in District I Out of District ER (enter a category not listed above)	
1 Total pages Schedule F1:		3 Filer	ID (Ethics Commission Filers)	
Sch: 2/11 Rpt: 44/53	Stonewall Democrats of Dallas PAC		53855	
4 Date	5 Payee name	•		
07/01/2024	American National Bank of Texas			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$192.16	2703 Oak Lawn Ave			
Expenditure from corporate funds	Dallas, TX 75219			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of T Check if Austin, TX, officer Bank fees.	exas. Complete Schedule T. older living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sou H	ght	Office held	
Date	Payee name			
09/03/2024	Authorize.Net			
		da		
Amount (\$) \$50.70	Payee address; City; State; Zip Co 808 E Utah Valley	de		
Expenditure from corporate funds	American Fork , UT 84003			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of T Check if Austin, TX, officer Software platform fee		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH			
Date	Payee name			
08/02/2024	Authorize.Net			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$50.35	808 E Utah Valley			
Expenditure from corporate funds	American Fork , UT 84003			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of T Check if Austin, TX, officer Software platform fee		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sou H	ght	Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food//Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 3/11 Rpt: 45/53	Stonewall Democrats of Dallas PAC 00053855			
4 Date	5 Payee name			
07/02/2024	Authorize.Net			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$50.35	808 E Utah Valley			
Expenditure from corporate funds	American Fork , UT 84003			
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Software platform fees. 			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
09/05/2024	Dallas County Democratic Party			
Amount (\$)	Payee address; City; State; Zip Code			
\$180.00	1414 N Washington Ave			
Expenditure from corporate funds	Dallas, TX 75204			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Labor Day Picnic sponsorship/entry. 			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held Office held				
Date	Payee name			
07/16/2024	Dallas County Democratic Party			
Amount (\$)	Payee address; City; State; Zip Code			
\$500.00	1414 N Washington Ave			
Expenditure from corporate funds	Dallas, TX 75204			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DCDP fundraiser fees. 			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District /- Gift/Awards/Memorials Expense Printing Expense Travel Out of District			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 4/11 Rpt: 46/53	Stonewall Democrats of Dallas PAC 00053855			
4 Date 09/16/2024	5 Payee name DeLuna, Josh			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$350.00				
Expenditure from corporate funds	ТХ			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense			
	DJ fees for "Queens for Kamala" event.			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name Office sought Office held H			
Date	Payee name			
09/03/2024	Google			
Amount (\$)	Payee address; City; State; Zip Code			
\$161.18	1600 Amphitheatre Pkwy			
φ101.10	1000 / Anphateate r Kwy			
Expenditure from corporate funds	Mountain View, CA 94043			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly G-Suite subscription fees. 			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
08/01/2024	Google			
Amount (\$)	Payee address; City; State; Zip Code			
\$161.18	1600 Amphitheatre Pkwy			
Expenditure from corporate funds	Mountain View, CA 94043			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly G-Suite subscription fees. 			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H			

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 5/11 Rpt: 47/53	Stonewall Democrats of Dallas PAC 00053855			
4 Date	5 Payee name			
07/01/2024	Google			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$161.18	1600 Amphitheatre Pkwy			
Expenditure from corporate funds	Mountain View, CA 94043			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense			
	Monthly G-Suite subscription fees.			
• Operation ONU V if align at				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
09/16/2024	Havran, James			
Amount (\$)	Payee address; City; State; Zip Code			
\$89.36	4224 Rawlins St			
	Unit #104			
Expenditure from corporate funds	Dallas, TX 75219			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event reimbursement. 			
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OF				
Date	Payee name			
09/25/2024	Hubspot			
Amount (\$)	Payee address; City; State; Zip Code			
\$44.78	2 Canal Park			
Expenditure from corporate funds	Cambridge, MA 02141			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense			
	Payment processing fees.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	e Travel Out of District /Contract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 6/11 Rpt: 48/53	Stonewall Democrats of Dallas PAC	00053855			
4 Date	5 Payee name				
08/26/2024	Hubspot				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$44.78	2 Canal Park				
Expenditure from corporate funds	Cambridge, MA 02141				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.			
		Check if Austin, TX, officeholder living expense Payment processing fees.			
		r ayment processing rees.			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held			
Date	Payee name				
07/25/2024	Hubspot				
Amount (\$)	Payee address; City; State; Zip Code				
\$42.64	2 Canal Park				
Expenditure from					
Corporate funds	Cambridge, MA 02141				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)(b) Fees	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payment processing fees.			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Office held Office held				
Date	Payee name				
09/06/2024	Hunky's Old Fashioned Hamburgers				
Amount (\$)	Payee address; City; State; Zip Code				
\$80.00	3930 Cedar Springs Rd				
Expenditure from corporate funds	Dallas, TX 75219				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description			
OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Bought food for monthly "Wine Walk".			
		bought lood for monthly wine walk .			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
Sch: 7/11 Rpt: 49/53	Stonewall Democrats of Dallas PAC 00053855				
4 Date	5 Payee name				
08/02/2024	Hunky's Old Fashioned Hamburgers				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$55.00	3930 Cedar Springs Rd				
Expenditure from corporate funds	Dallas, TX 75219				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.				
	Food expenses for monthly "Wine Walk".				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
09/18/2024	Italia Express				
Amount (\$)	Payee address; City; State; Zip Code				
\$149.39	4000 Cedar Springs Rd				
Expenditure from corporate funds	Dallas, TX 75219				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bought pizza for monthly meeting. 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
09/03/2024	LIFE STORAGE				
Amount (\$)	Payee address; City; State; Zip Code				
\$105.40	4640 Harry Hines				
Expenditure from corporate funds	Dallas, TX 75235				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly storage unit rental expense. 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 8/11 Rpt: 50/53	Stonewall Democrats of Dallas PAC 00053855					
4 Date	5 Payee name					
08/05/2024	LIFE STORAGE					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$105.40	4640 Harry Hines					
Expenditure from corporate funds	Dallas, TX 75235					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.					
	Check if Austin, TX, officeholder living expense Monthly storage unit rental expense.					
	monany storage unit remai expense.					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
07/03/2024	LIFE STORAGE					
Amount (\$)	Payee address; City; State; Zip Code					
\$105.40	4640 Harry Hines					
Expenditure from corporate funds	Dallas, TX 75235					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Monthly storage unit rental expense. 					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
09/19/2024	Oak Cliff Print					
Amount (\$)	Payee address; City; State; Zip Code					
\$184.02	734 W. Jefferson Blvd					
Expenditure from corporate funds	Dallas, TX 75208					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing expenses for Stonewall stickers. 					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 9/11 Rpt: 51/53	Stonewall Democrats of Dallas PAC 00053855					
4 Date 09/03/2024	5 Payee name Office Depot					
6 Amount (\$) \$101.24	7 Payee address; City; State; Zip Code					
corporate funds	Mesquite, TX					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event supplies expense.					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
08/26/2024	Pride in Dallas Inc.					
Amount (\$)	Payee address; City; State; Zip Code					
\$275.00	3824 Cedar Springs Rd #440					
Expenditure from corporate funds	Dallas, TX 75219					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dallas Pride vendor booth and parade place expenses. 					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H					
Date	Payee name					
09/20/2024	Reilly Echols Printing, Inc					
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 1710 South Harwood Road					
Expenditure from corporate funds	Dallas, TX 75215					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fees to print door hangers and slate cards. 					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H					

EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 10/11 Rpt: 52/53	Stonewall Democrats of Dallas PAC 00053855					
4 Date 09/19/2024	5 Payee name TX Latino Pride					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$1,250.00	512 W Davis St					
Expenditure from corporate funds	Dallas, TX 75208					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense TX Latino Pride sponsorship.					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
09/19/2024	Twisted Trick					
Amount (\$)	Payee address; City; State; Zip Code					
\$500.00	3917 Cedar Springs Rd					
Expenditure from corporate funds	Dallas, TX 75219					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Catering fees for "Queens for Kamala" event. 					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
09/09/2024	Zoom					
Amount (\$) \$94.60	Payee address; City; State; Zip Code 55 Almaden Blvd.					
Expenditure from	55 Ainaden Bivu.					
corporate funds	San Jose, CA 95113					
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Zoom monthly subscription fees. 					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Pollin y - Gift/Awards/Memorials Expense Printi	Repayment/Reimbursement Overhead/Rental Expense g Expense 19 Expense es/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
Sch: 11/11 Rpt: 53/53	Stonewall Democrats of Dallas PAC		00053855				
4 Date	5 Payee name						
08/07/2024	Zoom						
6 Amount (\$) \$94.60 Expenditure from corporate funds	 Payee address; City; State; Zip 55 Almaden Blvd. San Jose, CA 95113 	Code					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense n subscription fees.				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		sought	Office held				
Date	Payee name						
07/08/2024	Zoom						
Amount (\$) \$94.60	Payee address; City; State; Zip 55 Almaden Blvd. San Jose, CA 95113						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense n subscription fees.				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		sought	Office held				