#### FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00069781 3 COMMITTEE NAME **OFFICE USE ONLY GOTV Texas PAC** Date Received **ELECTRONICALLY FILED** 10/27/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 2504 Summit Drive Date Hand-delivered or Date Postmarked Change of Address Irving, TX 75062-5320 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. David NAME NICKNAME LAST **SUFFIX** Bradley STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2504 Summit Drive STREET **ADDRESS** (Residence or Business) Irving, TX 75062-5320 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2504 Summit Drive MAILING **ADDRESS** Irvin, TX 75062 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 213-1994 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 09/27/2024 10/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM **GPAC** COVER SHEET PG 2

| 2 COMMITTEE NAME   | 3 Filer ID   | (Ethics Commission Filers) |
|--|--------------|----------------------------|
| GOTV Texas PAC   | 00069782     | 1                          |
| 4 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.)  |              |                            |
| 2. Measures A. Supported   |              |                            |
| (Describe by date and location of election and nature of issue.)   |              |                            |
| B. Opposed   |              |                            |
| 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)   |              |                            |
| 5 CONTRIBUTION TOTALS  1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)    X check here if this report qualifies for the higher itemization threshold | \$           | 110.43                     |
| 2. TOTAL POLITICAL CONTRIBUTIONS  (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)  | \$           | 50,110.43                  |
| EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS  | \$           | 9.99                       |
| 4. TOTAL POLITICAL EXPENDITURES  | \$           | 92,796.6                   |
| CONTRIBUTION BALANCE  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST D OF THE REPORTING PERIOD   | AY <b>\$</b> | 5,953.30                   |
| OUTSTANDING LOAN TOTALS  6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD   | IE \$        | 0.0                        |
| 6 AFFIDAVIT  |              |                            |
| I swear, or affirm, under penalty of perjutrue and correct and includes all inform under Title 15, Election Code.  |              |                            |
|  |              |                            |
| Mr. David Signature of Cam   |              | nurer                      |
| AFFIX NOTARY STAMP / SEAL ABOVE  | paigii ireas | out et                     |
| Sworn to and subscribed before me, by the said, this   | sthe         | day                        |
| of, 20, to certify which, witness my hand and seal of office.  |              | aay                        |
|  |              |                            |
|  |              |                            |

#### GENERAL-PURPOSE COMMITTEE REPORT:

## FORM GPAC ADDENDUM

| PURPUSE   |   |                          |                               |                             | Page 3 of 7                |
|---|---|--------------------------|-------------------------------|-----------------------------|----------------------------|
| 12 COMMITTEE NAME<br>GOTV Texas PAC                                       |   |                          |                               | <b>13</b> Filer ID 00069781 | (Ethics Commission Filers) |
| 14 COMMITTEE<br>ACTIVITY  | Candidates  (Identify by name or, if applicable, classify by party.)                    | A. Supported             |                               |                             |                            |
| (Attach lists on plain paper to complete this report if necessary.)       |   | B. Opposed               |                               |                             |                            |
|   | 2. Measures (Describe by date and location of election and nature of issue.)            | A. Supported  B. Opposed |                               |                             |                            |
|   | 0.00  |                          | _                             |                             |                            |
|   | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)      |                          | Democrat                      |                             |                            |
| COMMITTEE<br>ACTIVITY   | Candidates     (Identify by name or, if applicable, classify by party.)                 | A. Supported             |                               |                             |                            |
| (Attach lists on plain<br>paper to complete this<br>report if necessary.) |   | B. Opposed               |                               |                             |                            |
|   | Measures     (Describe by date and location of election and nature of issue.)           | A. Supported             |                               |                             |                            |
|   |   | B. Opposed               |                               |                             |                            |
|   | Officeholders     Assisted     (Identify by name or, if applicable, classify by party.) |                          | Commissioner Theresa Daniel I | Dallas County C             | Commissioner, Precinct 1   |
|   | 1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   |                          |                               |                             |                            |
|   |   |                          |                               |                             |                            |
|   |   |                          |                               |                             |                            |
|   |   |                          |                               |                             |                            |
|   |   |                          |                               |                             |                            |
|   |   |                          |                               |                             |                            |

#### **SUBTOTALS - GPAC**

# FORM GPAC COVER SHEET PG 3

|  |                 |  |              | OVER SHEET         | 4 of 7    |  |
|--|-----------------|--|--------------|--------------------|-----------|--|
| <b>17</b> COM                                  |                 |  | 18 Filer ID  | (Ethics Commission | ı Filers) |  |
| GOTV Texas PAC 00069781  19 SCHEDULE SUBTOTALS |                 |  |              |                    |           |  |
|  | EDULE<br>E OF S | SUBTOTAL AI  | MOUNT        |                    |           |  |
| 1.   | X               | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                      |              | \$                 | 50,110.43 |  |
| 2.   |                 | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                        |              | \$                 |           |  |
| 3.   |                 | SCHEDULE B: PLEDGED CONTRIBUTIONS  |              | \$                 |           |  |
| 4.   |                 | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO<br>ORGANIZATION       | )R           | \$                 |           |  |
| 5.   |                 | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION | ATION OR     | \$                 |           |  |
| 6.   |                 | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG                        | ANIZATION    | \$                 |           |  |
| 7.   |                 | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION           |              | \$                 |           |  |
| 8.   |                 | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (                      | ORGANIZATION | \$                 |           |  |
| 9.   |                 | SCHEDULE E: LOANS  |              | \$                 |           |  |
| 10.  | X               | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:                   | S            | \$                 | 92,796.65 |  |
| 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 CONTRIBUTION                 | ONS          | \$                 |           |  |
| 15.  |                 | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER          | RETURNED     | \$                 |           |  |
|  |                 |  |              |                    |           |  |

|   | MONETARY POLITICAL CONTRIBUTIONS   |      | SCHEDULE A1                                     |
|---|--|------|---|
|   | The Instruction Guide explains how to complete this form.  |      | Total pages Schedule A1:<br>Sch: 1/1 Rpt: 5/7   |
| 2 | FILER NAME GOTV Texas PAC  |      | Filer ID (Ethics Commission Filers)<br>00069781 |
| 4 | Date 10/04/2024  5 Full name of contributor out-of-state PAC (ID#:) Goudarzi & Young, L.L.P.  6 Contributor address; City; State; Zip Code | 7    | Amount of Contribution (\$)<br>\$50,000.00      |
|   | Gilmer, TX 75644   |      |   |
| 8 | Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)   | ons) |   |
|   |  |      |   |

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Finding Expense States Magnet/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

| Credit Card Payment                                 | The Instruction Guide explains how to co                         | ·                | ete this form.   |  |
|---|--|------------------|--|--|
| 1 Total pages Schedule F1:                          | ·  |                  | 3 Filer ID (Ethics Commission Filers)  |  |
| Sch: 1/2 Rpt: 6/7                                   | GOTV Texas PAC   | 00069781         |  |  |
| 4 Date  | 5 Payee name   |                  |  |  |
| 10/01/2024  | Berlin Rosen, L.L.C.   |                  |  |  |
| 6 Amount (\$)                                       | 7 Payee address; City; State; Zip Co                             | ode              |  |  |
| \$25,405.46   | 15 Maiden Lane   |                  |  |  |
|   | Suite 1600   |                  |  |  |
| Expenditure from corporate funds                    | New York, NY 10038   |                  |  |  |
| 8 PURPOSE<br>OF                                     | (a) Category (See Categories listed at the top of this schedule) | (b)              | Description  |  |
| EXPENDITURE   | Printing Expense   |                  | Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |  |
|   |  |                  | Mailer production  |  |
|   |  |                  |  |  |
| Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sou<br>H                      | <b>I</b><br>ught | Office held  |  |
| Date  | Payee name   |                  |  |  |
| 10/01/2024  | Berlin Rosen, L.L.C.   |                  |  |  |
| Amount (\$)   | Payee address; City; State; Zip Co                               | ode              |  |  |
| \$20,881.20   | 15 Maiden Lane   |                  |  |  |
|   | Suite 1600   |                  |  |  |
| Expenditure from corporate funds                    | New York, NY 10038   |                  |  |  |
| PURPOSE<br>OF                                       | (a) Category (See Categories listed at the top of this schedule) | (b)              | Description  |  |
| EXPENDITURE   | Postage  |                  | Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense |  |
|   |  |                  | Mailer postage   |  |
|   |  |                  |  |  |
| Complete ONLY if direct expenditure to benefit C/O  | Candidate/Officeholder name Office sou<br>H                      | <u>I</u><br>ught | Office held  |  |
| Date  | Payee name   |                  |  |  |
| 10/01/2024  | Beyond The Slogan Consulting                                     |                  |  |  |
| Amount (\$)   | Payee address; City; State; Zip Co                               | ode              |  |  |
| \$45,000.00   | 2710 Routh Creek Parkway   |                  |  |  |
| ,   | ,  |                  |  |  |
| Expenditure from corporate funds                    | Richardson, TX 75082   |                  |  |  |
| PURPOSE   | (a) Category (See Categories listed at the top of this schedule) | (b)              | Description  |  |
| OF<br>EXPENDITURE                                   | Canvassing labor   |                  | Check if travel outside of Texas. Complete Schedule T.   |  |
|   |  |                  | Canvassing labor   |  |
|   |  |                  | Carraconing labor  |  |
| Complete <u>ONLY</u> if direct                      | Candidate/Officeholder name Office sou                           | laht             | Office held  |  |
| expenditure to benefit C/O                          |  | agrit            | Office Held  |  |
|   |  |                  |  |  |
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|   |  |                  |  |  |

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a extracer ret listed above)

| Contributions/ Donations Made E<br>Candidate/Officeholder/Politic<br>Credit Card Payment |  |          |
|--|--|----------|
| 1 Total pages Schedule F1:   | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)   | П        |
| Sch: 2/2 Rpt: 7/7  | GOTV Texas PAC 00069781  |          |
| 4 Date   | 5 Payee name   |          |
| 10/01/2024   | Theresa Daniel Campaign  |          |
| 6 Amount (\$)  | 7 Payee address; City; State; Zip Code   |          |
| \$1,500.00   | P.O. Box 181444  |          |
|  |  |          |
| Expenditure from corporate funds   | Dallas, TX 75218   |          |
| 8 PURPOSE  | (a) Category (See Categories listed at the top of this schedule) (b) Description                         |          |
| OF<br>EXPENDITURE  | Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.                   |          |
|  | Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Contribution |          |
|  | Contribution   |          |
|  |  | _        |
| 9 Complete <u>ONLY</u> if direct<br>expenditure to benefit C/C                           | Candidate/Officeholder name Office sought Office held OH   |          |
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