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) 00089066 3 COMMITTEE NAME **OFFICE USE ONLY** Worth The Vote PAC Date Received **ELECTRONICALLY FILED** 10/28/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 3437 W. 7th Street Date Hand-delivered or Date Postmarked PMB 131 Change of Address Fort Worth, TX 76107 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Lea NAME NICKNAME LAST **SUFFIX** Payne STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4001 Monticello Dr STREET **ADDRESS** (Residence or Business) Fort Worth, TX 76107 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 4001 Monticello Drive MAILING **ADDRESS** Fort Worth, TX 76107 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (817) 266-2049 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** 10/16/2024 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

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Worth The Vote PAC			00089066	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Charlie Geren State Represe	ntative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	4,287.54
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	4,287.54
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	0.00
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	<u>'</u>		<u>'</u>	
		I swear, or affirm, under penalty of pr true and correct and includes all info under Title 15, Election Code.		
		Lea	Payne	
		Signature of Ca	ampaign Treasur	er
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	,	this the	day
		which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of office	er administering oath

FORM GPAC ADDENDUM

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MITTEE NAME IN THE VOTE PAC MITTEE //ITY In lists on plain to complete this if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if	B. Oppose A. Suppor	ed	Bonnie Sudde	erth Court of App		Filer ID 00089066 Chief Justi		Commission File	ers)
MITTEE //ITY h lists on plain to complete this if necessary.)	(identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	B. Oppose A. Suppor	ed	Bonnie Sudde	erth Court of App					
h lists on plain to complete this if necessary.)	(identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	B. Oppose A. Suppor	ed	Bonnie Sudde	erth Court of App	r peals,C	Chief Justi	ce		
to complete this if necessary.)	(Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates	A. Suppor	ted							
	(Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates	B. Oppose								
	Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates		ed							
	Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates									
		A Sunnor	ted	Wada Birdwol	l Court Of Appe	ale III	ıstica			
	applicable, classify by party.)		ieu	wade Birdwei	r Court Of Appe	ais, Ju	istice			
h lists on plain to complete this if necessary.)		B. Oppose	ed							
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppor	ted							
		B. Oppose	ed							
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)									
	Candidates (Identify by name or, if	A. Suppor	ted	Dabney Basso	el Court Of App	eals, J	ustice			
to complete this		B. Oppose	ed							
	2. Measures (Describe by date and location of election and nature of issue.)	A. Suppor	ted							
		B. Oppose	ed							
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)									
	MITTEE VITY ch lists on plain to complete this t if necessary.)	2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Manual of the complete this trip if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if	2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) The lists on plain to complete this tif necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Support B. Oppose B.	2. Measures (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.) Ch lists on plain to complete this tif necessary.) 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported A. Supported B. Opposed B. Opposed A. Supported B. Opposed A. Supported Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if	2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) The lists on plain to complete this tif necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported Dabney Basse A. Supported Dabney Basse A. Supported A. Supported Dabney Basse A. Supported B. Opposed B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported Dabney Basse B. Opposed	2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) The lists on plain to complete this tif necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported Dabney Bassel Court Of Applicable, classify by party.) B. Opposed A. Supported B. Opposed A. Supported B. Opposed B. Opposed A. Supported B. Opposed	2. Measures (Describle by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Supported Dabney Bassel Court Of Appeals, J (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describle by date and location of election and nature of issue.) A. Supported Dabney Bassel Court Of Appeals, J B. Opposed A. Supported B. Opposed A. Supported Dabney Bassel Court Of Appeals, J B. Opposed	2. Measures (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.) Ch lists on plain to complete this it if necessary.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed A. Supported Dabney Bassel Court Of Appeals, Justice B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed	2. Measures (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.) A. Supported Dabney Bassel Court Of Appeals, Justice (Identify by name or, if applicable, classify by party.) b. h lists on plain to complete this b. if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) A. Supported Dabney Bassel Court Of Appeals, Justice (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported B. Opposed B. Opposed	2. Measures (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.) MITTEE VITY 1. Candidates (identify by name or, if applicable, classify by party.) B. Opposed A. Supported Dabney Bassel Court Of Appeals, Justice A. Supported Dabney Bassel Court Of Appeals, Justice B. Opposed B. Opposed B. Opposed 3. Officeholders (Describe by date and location of election and nature of issue.) B. Opposed B. Opposed 3. Officeholders Assisted (identify by name or, if applicable, classify by party.)

FORM GPAC ADDENDUM

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					Fage 4 01 13
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Worth The Vote PAC				00089066	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Mike Wallach Court Of Appeals	, Justice	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	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.)				
COMMITTEE			Malady Millinger District Ludge		
ACTIVITY	Candidates (Identify by name or, if	A. Supported	Melody Wilkinson District Judge	2	
	applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Christopher Taylor District Judg	je	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
	•				

FORM GPAC **ADDENDUM**

						Page 5 of 15
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Worth The Vote PAC					00089066	
14 COMMITTEE ACTIVITY (Attach lists on plain	1. Candidates (Identify by name or, if applicable, classify by party.)		Don Cosby Dis	trict Judge		
paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Pat Gallagher	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.)		Susan McCoy	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.)					

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		rage 0 01 13
12 COMMITTEE NAME		13 Filer ID (Ethics Commission Filers)
Worth The Vote PAC		00089066
14 COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by	A. Supported Chris Wolfe 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.)		
	B. Opposed	
Officeholders Assisted (Identify by name or, if applicable, classify by		
COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by	A. Supported Kimberly Fitzpatrick District 3 party.)	udge
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed	
Measures (Describe by date and location of election and nature of issue.)	A. Supported	
	B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by	f	
COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by	A. Supported Megan Fahey District Judge	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed	
Measures (Describe by date and location of election and nature of issue.)	A. Supported	
	B. Opposed	
3. Officeholders Assisted (Identify by name or, if applicable, classify by	f	
<u>, </u>		

FORM GPAC **ADDENDUM**

		Page 7 01 15
12 COMMITTEE NAME		13 Filer ID (Ethics Commission Filers)
Worth The Vote PAC		00089066
14 COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by par	A. Supported Josh Burgess District Judge	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed	
Measures (Describe by date and location of election and nature of issue.)	A. Supported	
	B. Opposed	
Officeholders Assisted (Identify by name or, if applicable, classify by par	ty.)	
COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by par	A. Supported Vincent Giardino District Judge)
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed	
Measures (Describe by date and location of election and nature of issue.)	A. Supported	
	B. Opposed	
Officeholders Assisted (Identify by name or, if applicable, classify by par	ty.)	
COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by par	A. Supported William Knight Criminal District	Court Judge, Tarrant Co.
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed	
Measures (Describe by date and location of election and nature of issue.)	A. Supported	
	B. Opposed	
Officeholders Assisted (Identify by name or, if applicable, classify by par	ty.)	

FORM GPAC ADDENDUM

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12 COMMITTEE NAME				1	3 Filer ID	(Ethics Comm	nission Filers)
Worth The Vote PAC					00089066		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Douglas Allen Criminal I	District Co	ourt Judge, Ta	arrant Co.	
(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		Patricia Baca Bennett F	amily Dist	rict Court Jud	ae	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Tanoa Basa Bernet T	army Disc	not Court oud	gc	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Bill E Waybourn Sheriff				
(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.)						
	Assisted (Identify by name or, if						

FORM GPAC ADDENDUM

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							rage 9 01 13
12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	Worth The Vote PAC					00089066	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		d Rick Barnes Co	ounty Tax Assess	sor Collector	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures	A. Supporte	d			
		(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.)					
	COMMITTEE	Candidates		d 1 D 1-b	0		
	ACTIVITY	(Identify by name or, if	A. Supporte	d Joe D Johnson	Constable		
	(Attack lists on plain	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. Supporte	d			
			B. Opposed				
		Officeholders Assisted					
		(Identify by name or, if applicable, classify by party.)					
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		d Michael Barber	County Commis	sioner	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures	A. Supporte	d			
		(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.)					

FORM GPAC **ADDENDUM**

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12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Worth The Vote PAC					00089066	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Dale Clark Consta	able		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Phil King State Se	enator		
(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.)		John McQueeney	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.)					

FORM GPAC ADDENDUM

					Page 11 of 15
				13 Filer ID	(Ethics Commission Filers)
				00089066	
Candidates (Identify by name or, if applicable, classify by party.)		Jon Siegel Cor	nstable		
	B. Opposed				
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
	B. Opposed				
Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
Candidates (Identify by name or, if applicable, classify by party.)		Craig Goldman	US Congress		
	B. Opposed				
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
	B. Opposed				
Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	(Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) A. Supported B. Opposed B. Opposed 3. Officeholders Assisted A. Supported	(Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (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.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (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.)	(Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (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.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed Craig Goldman US Congress (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (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.)	1. Candidates (identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (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.) 1. Candidates (identify by name or, if applicable, classify by party.) B. Opposed 4. Supported Craig Goldman US Congress (identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (identify by name or, if applicable, classify by date and location of election and nature of issue.) B. Opposed

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

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17 COMMITTI	EE NAME e Vote PAC	18 Filer ID 00089066	(Ethics Commission Filers)
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 4,287.54
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 CORPORALABOR 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	\$ 4,287.54
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	\$
I			

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 13/15	
2	FILER NAME Worth The V	ote PAC		3	Filer ID (Ethics Commission 00089066	on Filers)
4	Date 10/26/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$950.00
_	Distribution	Fort Worth, TX 76107	2. Evolution (Contraction			
8	Insurance	pation / Job title (See Instructions)	Employer (See Instructions Farmers	5)		
	Date 10/26/2024	Full name of contributor out-of-state PAC (ID#: Dike, Stephanie Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occur	Fort Worth, TX 76114 pation / Job title (See Instructions)	Employer (See Instructions			
	Retired	Jation 7 300 title (See Instructions)	Employer (See Instructions	')		
	Date 10/26/2024	Full name of contributor out-of-state PAC (ID#: Duval, Laura Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
		Fort Worth, TX 76107				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 10/26/2024	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,066.79
	Principal occu Realtor	pation / Job title (See Instructions)	Employer (See Instructions Williams Trew)		
	Date 10/26/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$300.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

FARY POLITICAL CONTRIBU	TIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form. 2 FILER NAME Worth The Vote PAC		1 Total pages Schedule A1: Sch: 2/2 Rpt: 14/15
		3 Filer ID (Ethics Commission Filers) 00089066
Full name of contributor	(ID#:)	7 Amount of Contribution (\$) \$1,620.75
Fort Worth, TX 76107	D. Frankriger (Construction	
upation / Job title (See Instructions)	9 Employer (See Instruction:	s)
1 = \rangle	/ote PAC 5 Full name of contributor out-of-state PAC Payne, Lea 6 Contributor address; City; State; Zip Code	/ote PAC 5 Full name of contributor out-of-state PAC (ID#:) Payne, Lea 6 Contributor address; City; State; Zip Code Fort Worth, TX 76107

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 Salaries/Wanes/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		Expense Travel Out of District OTHER (enter a category not listed above) complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 15/15	Worth The Vote PAC	00089066
4 Date	5 Payee name	
10/18/2024	Super Agent Marketing	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$4,287.54	4301 Simonton Rd	
Expenditure from	Suite 100	
corporate funds	Dallas, TX 75244	
8 PURPOSE 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
		Printing and direct mailing expense
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office so	ought Office held