FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00082127 3 COMMITTEE NAME **OFFICE USE ONLY Bayou Blue Democrats** Date Received **ELECTRONICALLY FILED** 10/30/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 2111 Welch Street Unit B312 Change of Address Houston, TX 77019 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Ms. Yvonne NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Myles CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2111 Welch Street STREET **ADDRESS** Unit B312 (Residence or Business) Houston, TX 77019 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 2111 Welch Street MAILING **ADDRESS APT B312** Change of Address Houston, TX 77019 AREA CODE **CAMPAIGN** PHONE NUMBER **EXTENSION TREASURER PHONE** (832) 250-8392 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 09/26/2024 10/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Bayou Blue Democrats 000			00082127	
14 COMMITTEE 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		
	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 X check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
		2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	81.68
CONTRIBUTION BALANCE	I	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		1,981.31
OUTSTANDING LOAN TOTALS	I	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		
16 AFFIDAVIT	<u> </u>		<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Ms. Yvo	nne Myles	
		Signature of Ca	mpaign Treasure	er
AFFIX NOTA	ARY STAMP / SEAL ABOVE			
		, ti	his the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Cionetius of etti-	v odministovine a sta	Drietod name of officer administratives and	Title of off:	ar administaring a stle
Signature of Office	er administering oath	Printed name of officer administering oath	Tille OF OHICE	er administering oath

SUBTOTALS - MPAC

FORM MPAC **COVER SHEET PG 3**

					3 01 5
17 CON	MMITTE	E NAME	18 Filer ID	(Ethics Commiss	ion Filers)
Bay	ou Blu	e Democrats	00082127		
19 SCH	1EDIJI E	T			
		SCHEDULE		SUBTOTAL	AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	573.24
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	
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	\$	81.68
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.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/5
2	FILER NAME Bayou Blue Democrats	3 Filer ID (Ethics Commission Filers) 00082127
4	Date 10/20/2024 5 Full name of contributor out-of-state PAC (ID#:) ACTBLUE TEXAS 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$480.
_	Somerville, MA 02144	
8	Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	ons)
	Date Full name of contributor out-of-state PAC (ID#:) 10/10/2024 Myles, Yvonne (Ms.) Contributor address; City; State; Zip Code	Amount of Contribution (\$) \$93.
	Houston, TX 77019-5654 Principal occupation / Job title (See Instructions) retired Employer (See Instructions)	ons)

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expl		nse es/Contract Labor	Travel in District Travel Out of District OTHER (enter a ca	ict ategory not listed above)
1 Total pages Schedule F1:	2 FILER NAM	-			3 Filer ID	(Ethics Commission Filers)
Sch: 1/1 Rpt: 5/5		e Democrats			00082127	(2
4 Date	5 Payee name)		•		
10/09/2024	Bond, Ingr					
6 Amount (\$)	7 Payee addr	ess; City; S	State; Zip Code	<u> </u>		
\$81.68	2504 Del N		·			
Expenditure from corporate funds	Houston, 1	X 77019				
8 PURPOSE	(a) Category (See Categories listed at the top of the	his schedule) (b) Description		
OF EXPENDITURE		Food/Beverage Expense				
				_	TX, officeholder living e	
				Refresiments	for club meetin	g
9 Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sough	t	Office held	