GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	e GPAC Instruction	Guide explains how to complete this form.	1	Filer ID (Ethics Commission Filers) 00070512		2 Total pages filed: 20		
3	COMMITTEE NAME					OFFICE USE ONLY		
	Democratic Non-U	rban Caucus				Date Received		
						ELECTRONICALLY FILED		
						01/07/2025		
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CI	TY;	STATE; ZIP	CODE			
	ADDRESS	5656 N. Central Expressway, Unit 302				Date Hand-delivered or Date Postmarked		
						Date Hand-delivered of Date Postmarked		
	Change of Address	Dallas, TX 75206				Receipt # Amount		
						Date Processed		
						Date Imaged		
5	CAMPAIGN	MS / MRS / MR FIRST				MI		
	TREASURER NAME	Ms. Judy L.						
		NICKNAME LAST						
		NICKNAME LAST Baker				SUFFIX		
		Dation						
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE)		APT / SUITE #;	CITY;	STATE; ZIP CODE		
	TREASURER STREET	1500 E Marshall Ave						
	ADDRESS	Apt 30						
	(Residence or Business)	Longview, TX 75601						
7	CAMPAIGN	STREET OR PO BOX;		APT / SUITE #;	CITY	; STATE; ZIP CODE		
	TREASURER MAILING	1500E Marshall Ave						
	ADDRESS	Apt 30						
	Change of Address	Longview, TX 75601						
8	CAMPAIGN	AREA CODE PHONE NUMBER	EX	ENSION				
		(575) 640-7942						
	PHONE							
9	REPORT TYPE	X January 15	0th d	lay before election		Dissolution (Attach PAC-DR)		
			th da	y before election		10th day after campaign treasurer		
		July 15		-	L	termination		
			Runo	ı 				
10	PERIOD COVERED	Month Day Year		Month	Day	Year		
	COVERED	07/01/2024 7	HR	DUGH 1	2/31/2024	4		
11	ELECTION	ELECTION DATE		ELECTION	TYDE			
**		Month Day Year	Prim		TIFE	Other		
		11/05/2024						
		X	Gen	eral Special				
	GO TO PAGE 2							
For	rms provided by Tex	kas Ethics Commission www.e	ethic	s.state.tx.us		Version V4.1.0.d378aba		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID	(Ethics Commission Filers)		
Democratic Non-Urban	Caucus		0007051	2
14 COMMITTEE ACTIVITY	1. 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		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M Check here if this report	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)	\$	1,025.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	520.88
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	4,434.97
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.		
			L. Baker	
	STAMP / SEAL ABOVE	Signature of Car	npaign Treas	surer
		, tł	is the	day
		which, witness my hand and seal of office.		uuj
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of of	ficer administering oath
Forms provided by Texas E	Ethics Commission	www.ethics.state.tx.us		Version V4.1.0.d378aba0

FORM GPAC COVER SHEET PG 3

3 of 20

17 COMMITTE	EE NAME	18 Filer ID	(Ethics Commission Filers)
Democrat	ic Non-Urban Caucus	00070512	
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1. X	\$ 1,025.00		
2.	\$		
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 C	ORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$ 520.88
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$
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 complete this f	orm.		Total pages Schedule A1: Sch: 1/11 Rpt: 4/20	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
-		Non-Urban Caucus			00070512	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/01/2024	Cox, Karen (Ms.)				\$20.00
		6 Contributor address; City; State; Zip Code		"		
		Austin, TX 78749				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	retired		none			
	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	07/01/2024	Adams, John (Mr.)				\$5.00
		Contributor address; City; State; Zip Code		·		
		Huntsville, TX 77331				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	none		none			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Τ	Amount of Contribution (\$)	
	08/31/2024	Adams, John (Mr.)				\$5.00
		Contributor address; City; State; Zip Code		-		
		Huntsville, TX 77331				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	 s)		
	none		none			
╞	Date	Full name of contributor Out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	09/30/2024	Adams, John (Mr.)			· · · · · ·	\$5.00
	• • • •	Contributor address; City; State; Zip Code				
		Huntsville, TX 77331				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	 s)		
	none		none			
╞	Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Τ	Amount of Contribution (\$)	
	07/01/2024	Georgulas, George (Mr.)			· · · · · · · · · · · · · · · · · · ·	\$200.00
		Contributor address; City; State; Zip Code		·		• -
		Spicewood, TX 78669				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	⊥ s)		
	none	, , , , , , , , , , , , , , , , , , ,	none	-,		
⊢						
1						

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	The Instru	ction Guide explains how to compl	ete this fo	rm.	1	Total pages Schedule A1: Sch: 2/11 Rpt: 5/20	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		Non-Urban Caucus			-	00070512	
4	Date	5 Full name of contributor out-of-stat	te PAC (ID#:)	7	Amount of Contribution (\$)	
	07/05/2024	Jones, Carl (Mr.)					\$15.00
	I	6 Contributor address; City; State; Zip Code			1		
	I						
	I						
		Spicewood, TX 78669					
8		pation / Job title (See Instructions)	g	9 Employer (See Instructions	5)		
	Retired			none			
F	Date	Full name of contributor out-of-stat	te PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/06/2024	Jones, Carl (Mr.)					\$15.00
		Contributor address; City; State; Zip Code			1		
	I						
	I						
		Spicewood, TX 78669					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	3)		
	Retired			none			
F	Date	Full name of contributor 🛛 out-of-stat	te PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/06/2024	Jones, Carl (Mr.)					\$15.00
		Contributor address; City; State; Zip Code			1		
	I						
	I						
		Spicewood, TX 78669					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			none			
	Date	Full name of contributor 🔲 out-of-stat	te PAC (ID#:)	Ē	Amount of Contribution (\$)	
	10/05/2024	Jones, Carl (Mr.)					\$15.00
	I	Contributor address; City; State; Zip Code			1		
	I						
	I						
		Spicewood, TX 78669					
		pation / Job title (See Instructions)		Employer (See Instructions	3)		
	Retired			none			
	Date	Full name of contributor 🔲 out-of-stat	te PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/06/2024	Jones, Carl (Mr.)					\$15.00
	I	Contributor address; City; State; Zip Code	<u>و</u>				
	l						
	l						
		Spicewood, TX 78669					
		pation / Job title (See Instructions)		Employer (See Instructions	3)		
	Retired			none			

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	The Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 3/11 Rpt: 6/20	
2	FILER NAME			3	Filer ID (Ethics Commission	ı Filers)
		Non-Urban Caucus			00070512	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/09/2024					\$25.00
		6 Contributor address; City; State; Zip Code		.		
		Austin, TX 78731				
8		upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Librarian		University of Texas			
	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	07/20/2024	LePak, Michael (Mr.)				\$20.00
		Contributor address; City; State; Zip Code		.		
		San Angelo, TX 76907				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Security		Allied Universal			
	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	07/01/2024	Lockhart, Mary Bell (Ms.)				\$10.00
		Contributor address; City; State; Zip Code		.		
		Alpine, TX 79830				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	none	ļ	none			
	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	07/16/2024	Lockhart, Mary Bell (Ms.)				\$10.00
		Contributor address; City; State; Zip Code		·		
		Alpine, TX 79830				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	none	ļ	none			
	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	08/10/2024	Lockhart, Mary Bell (Ms.)				\$10.00
		Contributor address; City; State; Zip Code		·		
		Alpine, TX 79830				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	none	i i i i i i i i i i i i i i i i i i i	none			
		I				

	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 4/11 Rpt: 7/20	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
		Non-Urban Caucus			00070512	,
4	Date	5 Full name of contributor Out-of-state PAC (ID#	<i>‡</i> :)	7	Amount of Contribution (\$)	
	09/10/2024	Lockhart, Mary Bell (Ms.)				\$10.00
		6 Contributor address; City; State; Zip Code		1		
		Alpine, TX 79830				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	none		none			
	Date	Full name of contributor out-of-state PAC (ID#	#:)	Ī	Amount of Contribution (\$)	
	10/10/2024	Lockhart, Mary Bell (Ms.)				\$10.00
		Contributor address; City; State; Zip Code		1		
	Driveland	Alpine, TX 79830		Ĺ		
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	none		none	1		
	Date	Full name of contributor Out-of-state PAC (ID#	#:)		Amount of Contribution (\$)	÷10.00
	11/10/2024	Lockhart, Mary Bell (Ms.)				\$10.00
		Contributor address; City; State; Zip Code				
		Alpine, TX 79830				
⊢	Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	1 5)		
	none		none			
⊨	Date	Full name of contributor out-of-state PAC (ID#	#:)	Γ	Amount of Contribution (\$)	
	07/16/2024	Moughon, Esward (Mr.)				\$20.00
		Contributor address; City; State; Zip Code		1		
		Big Spring, TX 79720				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	retired		retired			
Γ	Date	Full name of contributor Dut-of-state PAC (ID#	¢:)	Γ	Amount of Contribution (\$)	
	11/20/2024	Nichols, Nancy (Ms.)				\$20.00
		Contributor address; City; State; Zip Code]		
		Tylor TX 75706				
	Dringinglage	Tyler, TX 75706				
	sales	upation / Job title (See Instructions)	Employer (See Instructions Firelight Books	5)		
┝	54103					

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	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 5/11 Rpt: 8/20	
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
		Non-Urban Caucus			00070512	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:_	:)	7	Amount of Contribution (\$)	
	07/01/2024	Pumfrey, William (Mr.)				\$50.00
		6 Contributor address; City; State; Zip Code		1		
<u> </u>	Dringingloog	Austin, TX 78736				
8	Principal occu retired	upation / Job title (See Instructions)	9 Employer (See Instructions) none	;)		
		<u> </u>	<u> </u>	—		
	Date		:)		Amount of Contribution (\$)	<u> </u>
	07/01/2024					\$5.00
		Contributor address; City; State; Zip Code				
		La Grange, TX 78945				
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>ا</u> چ)		
	Architect	· · ·	Weave Architecture LLC			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	07/27/2024	Schenker, Rebecca (Ms.)			•••	\$5.00
		Contributor address; City; State; Zip Code		1		
		La Grange, TX 78945				
		upation / Job title (See Instructions)	Employer (See Instructions)			
	Architect	<u> </u>	Weave Architecture LLC	; —		
	Date		:)		Amount of Contribution (\$)	
	08/27/2024					\$5.00
		Contributor address; City; State; Zip Code				
		La Grange, TX 78945				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>ا</u> چ)		
	Architect		Weave Architecture LLC			
╞	Date	Full name of contributor out-of-state PAC (ID#:	<u> </u>	<u> </u>	Amount of Contribution (\$)	
	09/27/2024	Schenker, Rebecca (Ms.)	,			\$5.00
		Contributor address; City; State; Zip Code		{		
		La Grange, TX 78945				
		upation / Job title (See Instructions)	Employer (See Instructions)			
	Architect		Weave Architecture LLC	2		

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 6/11 Rpt: 9/20
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Non-Urban Caucus		00070512
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
10/27/2024	Schenker, Rebecca (Ms.)		\$5.0
	6 Contributor address; City; State; Zip Code		
Dringingloggy	La Grange, TX 78945	Contract (See Instructions	
8 Principal occu Architect	upation / Job title (See Instructions)	9 Employer (See Instructions Weave Architecture LLC	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
11/27/2024	Schenker, Rebecca (Ms.)		\$5.0
	Contributor address; City; State; Zip Code		
	La Grange, TX 78945		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	
Architect	1	Weave Architecture LLC	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
07/05/2024	Spain, Diana (Ms.)		\$10.0
Principal occu	Austin, TX 78751 upation / Job title (See Instructions)	Employer (See Instructions	()
none		none	7
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)
08/05/2024	Spain, Diana (Ms.)	/	\$10.0
00/03/2024			φ10.
	Contributor address; City; State; Zip Code		
	Austin, TX 78751		
Principal occu none	upation / Job title (See Instructions)	Employer (See Instructions none	;;)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/05/2024	Spain, Diana (Ms.)		\$10.0
	Contributor address; City; State; Zip Code		
	Austin, TX 78751		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions) ;)
none		none	
		<u> </u>	

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	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/11 Rpt: 10/20	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
		Non-Urban Caucus				00070512	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/05/2024	Spain, Diana (Ms.)	—				\$10.00
		6 Contributor address; City; Sta	ate; Zip Code		1		
Ļ	Duin singly good	Austin, TX 78751			Ĺ		
8	Principal occu none	pation / Job title (See Instructions)		9 Employer (See Instructions none	5)		
					1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	11/05/2024	Spain, Diana (Ms.)					\$10.00
		Contributor address; City; Stat	te; Zip Code				
		Austin, TX 78751					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	L 5)		
	none	-		none			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/30/2024	Tonnesen, Alan (Mr.)					\$50.00
		Contributor address; City; Sta			1		
			· ·				
		Spicewood, TX 78669					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	none			none	-		
	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
	07/01/2024]		\$5.00
		Contributor address; City; Star					
		Lampasas, TX 76550					
	Principal occu	Ipation / Job title (See Instructions)		Employer (See Instructions	<u>ار</u> ج)		
	Statewide Co	,		Our Revolution Texas	-,		
╞	Date	Full name of contributor	out-of-state PAC (ID#:	<u> </u>	Γ	Amount of Contribution (\$)	
	07/14/2024	Tucker, Clayton (Mr.)		/			\$5.00
	•	Contributor address; City; Stat	ate. Zin Code		ł		Ŧ
			10, <u>L.</u> p 0000				
		Lampasas, TX 76550					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Statewide Co	oordinator		Our Revolution Texas			

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 8/11 Rpt: 11/20	
2 FILER NAME			3 Filer ID (Ethics Commiss	sion Filers)
	Non-Urban Caucus		00070512	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
08/14/2024	Tucker, Clayton (Mr.)			\$5.00
	6 Contributor address; City; State; Zip Code			
	Lampasas, TX 76550			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	
Statewide Co		Our Revolution Texas	, ,	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/14/2024	Tucker, Clayton (Mr.)			\$5.00
	Contributor address; City; State; Zip Code			
	Lampasas, TX 76550			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	
Statewide Co	oordinator	Our Revolution Texas		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/14/2024	Tucker, Clayton (Mr.)			\$5.00
	Contributor address; City; State; Zip Code			
	Lampasas, TX 76550			
	pation / Job title (See Instructions)	Employer (See Instructions)	
Statewide Co	oordinator	Our Revolution Texas		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
11/14/2024	Tucker, Clayton (Mr.)			\$5.00
	Contributor address; City; State; Zip Code			
	Lampasas, TX 76550			
	pation / Job title (See Instructions)	Employer (See Instructions)	
Statewide Co	oordinator	Our Revolution Texas		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
07/01/2024	Wilkerson, D. Karen (Ms.)			\$50.00
	Contributor address; City; State; Zip Code			
	- L			
	Tyler, TX 75711		-	
	pation / Job title (See Instructions)	Employer (See Instructions)	
none		none		

The Instruc	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 9/11 Rpt: 12/20	
2 FILER NAME			3 Filer ID (Ethics Commission Fi	ilers)
	Non-Urban Caucus		00070512	1013)
4 Date	5 Full name of contributor out-of-state PAC (ID#	#:)	7 Amount of Contribution (\$)	
07/24/2024	Wilkerson, D. Karen (Ms.)			\$50.00
	6 Contributor address; City; State; Zip Code		·	
	Tyler, TX 75711			
8 Principal occu none	ipation / Job title (See Instructions)	9 Employer (See Instructions none	5)	
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
08/24/2024	Wilkerson, D. Karen (Ms.)			\$50.00
	Tyler, TX 75711			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)	
none		none		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
09/24/2024	Wilkerson, D. Karen (Ms.)			\$50.00
	Contributor address; City; State; Zip Code			
	Tyler, TX 75711			
	ipation / Job title (See Instructions)	Employer (See Instructions	6)	
none		none		
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
10/24/2024	Wilkerson, D. Karen (Ms.)			\$50.00
	Contributor address; City; State; Zip Code			
	Tyler, TX 75711			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)	
none		none		
Date	Full name of contributor out-of-state PAC (ID#		Amount of Contribution (\$)	
11/24/2024	Wilkerson, D. Karen (Ms.)			\$50.00
	Contributor address; City; State; Zip Code			
	Tyler, TX 75711	-		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
none		none		
none		none		

	The Instru	ction Guide explains how to complete this f		Total pages Schedule A1: Sch: 10/11 Rpt: 13/20		
2	FILER NAME			3	Filer ID (Ethics Commission	Filers)
-		Democratic Non-Urban Caucus			00070512	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	07/01/2024	Yancy, Max (Mr.)				\$10.00
		6 Contributor address; City; State; Zip Code		"		
-		Austin, TX 78722				
8		Principal occupation / Job title (See Instructions) 9 Employer (See Instruction		s)		
	Event Coord		Koop radio			
	Date)		Amount of Contribution (\$)	
	07/22/2024	Yancy, Max (Mr.)				\$10.00
	I	Contributor address; City; State; Zip Code		1		
		Austin, TX 78722				
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Event Coord	inatior	Koop radio			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/22/2024	Yancy, Max (Mr.)				\$10.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78722				
	Principal occupation / Job title (See Instructions) Employer (S		Employer (See Instructions	s)		
	Event Coord	linatior	Koop radio			
	Date	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
	09/22/2024	Yancy, Max (Mr.)				\$10.00
	1	Contributor address; City; State; Zip Code		·		
		Austin, TX 78722				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Event Coord	linatior	Koop radio			
	Date	Full name of contributor out-of-state PAC (ID#:)	Ι	Amount of Contribution (\$)	
	10/22/2024	Yancy, Max (Mr.)				\$10.00
	I	Contributor address; City; State; Zip Code		·		
		Austin, TX 78722				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Event Coord	linatior	Koop radio			
1						

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/20
2 FILER NAME Democratic Non-Urban Caucus	3 Filer ID (Ethics Commission Filers) 00070512
4 Date 5 Full name of contributor out-of-state PAC (ID#:	_) 7 Amount of Contribution (\$)
Austin, TX 78722	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Event Coordination Koop radio	ictions)

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 y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District	e			
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Fil	lers)			
Sch: 1/6 Rpt: 15/20	Democratic Non-Urban Caucus 00070512				
4 Date	5 Payee name				
07/01/2024	Act Blue Texas				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$6.15	P.O. Box441146				
Expenditure from corporate funds	Sommerville, MA 02144				
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 charge for usage				
	Charge for usage				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
07/24/2024	Act Blue Texas				
Amount (\$)	Payee address; City; State; Zip Code				
\$2.58	P.O. Box441146				
Expenditure from corporate funds Sommerville, MA 02144					
PURPOSE OF EXPENDITURE	 (b) Description Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Usage cost 				
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
07/24/2024	Act Blue Texas				
Amount (\$)	Payee address; City; State; Zip Code				
\$4.17 P.O. Box441146					
Expenditure from corporate funds Sommerville, MA 02144					
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 Usage cost				
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	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/Political Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhaed/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: 2/6 Rpt: 16/20	Democratic Non-Urban Caucus 00070512					
4 Date	5 Payee name					
08/31/2024	Act Blue Texas					
6 Amount (\$) \$1.60						
Expenditure from corporate funds	Sommerville, MA 02144					
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 usage charge 					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
09/24/2024	Act Blue Texas					
Amount (\$) \$4.38						
Expenditure from corporate funds	Sommerville, MA 02144					
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 charges for usage 					
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
10/19/2024	Act Blue Texas					
Amount (\$) \$5.76	Payee address; City; State; Zip Code P.O. Box441146					
Expenditure from corporate funds	Sommerville, MA 02144					
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 Service charge for usuage 					
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 B Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repa Fees Office Ove Food/Beverage Expense Polling Ex y - Gift/Awards/Memorials Expense Printing Ex	yment/Reinbursement Solicitation/Fundraising Expense rhead/Rental Expense Transportation Equipment & Related Expense pense Travel in District ges/Contract Labor OTHER (enter a category not listed above)				
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 3/6 Rpt: 17/20	Democratic Non-Urban Caucus	00070512				
4 Date	5 Payee name					
10/14/2024	Act Blue Texas					
6 Amount (\$)	7 Payee address; City; State; Zip Co	de				
\$0.60	P.O. Box441146					
Expenditure from corporate funds						
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		usage charges				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght Office held				
Date	Payee name					
10/27/2024	Act Blue Texas					
Amount (\$)	Payee address; City; State; Zip Co	de				
\$2.58	\$2.58 P.O. Box441146					
Expenditure from corporate funds						
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 Usage charge 					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	I Candidate/Officeholder name Office sou H	ght Office held				
Date Payee name						
11/10/2024	Act Blue Texas					
Amount (\$)	de					
Amount (\$)Payee address;City;State;Zip Code\$2.00P.O. Box441146						
Expenditure from corporate funds Sommerville, MA 02144						
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 usage charge 				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght Office held				

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: 4/6 Rpt: 18/20	Democratic Non-Urban Caucus 00070512				
4 Date	5 Pavee name				
11/27/2024	Act Blue Texas				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$3.57	P.O. Box441146				
Expenditure from corporate funds	Sommerville, MA 02144				
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.				
-	Check if Austin, TX, officeholder living expense				
	usage charge 0298 5673 6657				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
08/22/2024	Nation Builder				
Amount (\$)	Payee address; City; State; Zip Code				
.,					
\$110.00	6515 W Sunset Blvd				
Expenditure from corporate funds	Ste 440 Los Angeles, CA 90028				
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense monthly fee for data use 				
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
09/22/2024	Nation Builder				
Amount (\$)	Payee address; City; State; Zip Code				
\$55.00	6515 W Sunset Blvd				
ູ ອີວິວ . ປປ					
Expenditure from	Ste 440				
corporate funds	Los Angeles, CA 90028				
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 charge for data base					
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held				

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: 5/6 Rpt: 19/20	Democratic Non-Urban Caucus 00070512					
4 Date	5 Payee name					
11/22/2024	Nation Builder					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$55.00	6515 W Sunset Blvd					
	Ste 440					
Expenditure from						
corporate funds	Los Angeles, CA 90028					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF	Fees Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE	Check if Austin, TX, officeholder living expense					
	monthly charge for usuage					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
11/22/2024	Nation Builder					
Amount (\$)	Payee address; City; State; Zip Code					
\$55.00	6515 W Sunset Blvd					
	Sto 440					
Expenditure from	Ste 440					
corporate funds	Los Angeles, CA 90028					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE						
	monthly charge for data					
Complete ONIL V if direct	Candidate/Office helder name					
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held					
experiature to benefit ever						
Date	Payee name					
12/22/2024	Nation Builder					
Amount (\$)	Payee address; City; State; Zip Code					
\$55.00	6515 W Sunset Blvd					
	Ste 440					
Expenditure from						
Los Angeles, CA 90028						
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	Computer and internet Check if travel outside of Texas. Complete Schedule T.					
EXPENDITURE	Check if Austin, TX, officeholder living expense					
	Computer monthly expense					
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/OF	Ç					

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Fees Food/ - Gift/A I Committee Legal	XPENDITURE CATEGO Expense Beverage Expense wards/Memorials Expense Services Instruction Guide explains	Loan Repayment/Reimburse Office Overhead/Rental Exp Polling Expense Printing Expense Salaries/Wages/Contract La	ense Transporta Travel in D Travel Out bor OTHER (en	
1 Total pages Schedule F1:	2 FILER NAME			3 Filer ID	(Ethics Commission Filers)
Sch: 6/6 Rpt: 20/20	Democratic Non	-Urban Caucus		000705	12
4 Date	5 Payee name				
09/16/2024	Office Depot				
6 Amount (\$) \$157.49	7 Payee address; Loop 281	City; State	e; Zip Code		
Expenditure from corporate funds	Longview, TX 7	5601			
8 PURPOSE OF EXPENDITURE	(a) Category _{(See Cat} Office supplies	egories listed at the top of this sc	Check	ion if travel outside of Texas. if Austin, TX, officeholder ridges for printer	•
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	I Candidate/Officeho H	lder name	Office sought	Offic	ce held