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) 00043028 3 COMMITTEE NAME **OFFICE USE ONLY** West Houston Democratic Club Date Received **ELECTRONICALLY FILED** 01/03/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 13114 Waldemere Date Hand-delivered or Date Postmarked Change of Address Houston, TX 77077 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Barry NAME NICKNAME LAST **SUFFIX** Halpern STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 11510 Royal Plain Ave. STREET **ADDRESS** (Residence or Business) Houston, TX 77082 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 11510 Royal Plain Ave. MAILING **ADDRESS** Houston, TX 77082 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 531-7979 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** 07/01/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

| 2 COMMITTEE NAME | | 11 | L3 Filer ID | (Ethics Commission Filers) | | | |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------|--|--|--|
| West Houston Demo | cratic Club | | 00043028 | , | | | |
| 4 COMMITTEE | 1. Candidates | A. Supported | | | | | |
| 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 | 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.) | | | | | | |
| 5 CONTRIBUTION TOTALS | PLEDGES, LOANS, CONTRIBUTIONS N | D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) t qualifies for the higher itemization threshold | \$ | 3,631.00 | | | |
| | | AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 9,006.00 | | | |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZE | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | | | | | |
| | 4. TOTAL POLITICA | AL EXPENDITURES | \$ | 9,106.55 | | | |
| CONTRIBUTION BALANCE | • | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | | | | | |
| OUTSTANDING LOAN TOTALS | • | AMOUNT OF ALL OUTSTANDING LOANS AS OF THE REPORTING PERIOD | HE \$ | 0.00 | | | |
| 6 AFFIDAVIT | l | | l | | | | |
| | | I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code. | | | | | |
| | | | | | | | |
| | | Mr. Barry | - | | | | |
| | | Signature of Can | ipaign Treasu | irer | | | |
| AFFIX NOTA | RY STAMP / SEAL ABOVE | | | | | | |
| Sworn to and subscrib | oed before me, by the said _ | , thi | is the | day | | | |
| | | which, witness my hand and seal of office. | | - | | | |
| | | | | | | | |
| Signature of officer | administering oath | Printed name of officer administering oath | Title of office | cer administering oath | | | |
| Signature of officer | aummistering valli | rimed name of onicer autilitistering batti | riue oi oilic | cer auministening Odth | | | |

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

| | | | | | 3 of 13 |
|--------------|---------|----------------------------------------------------------------------------------|-------------|--------------------|-----------|
| 17 CO | MMITTE | EE NAME | 18 Filer ID | (Ethics Commission | n Filers) |
| | st Hou | (201100 0011111100101 | 11 11010) | | |
| | HEDULI | 00043028 | T | | |
| l | ME OF | | SUBTOTAL A | MOUNT | |
| - 147 (| IVIL OI | | | | |
| 1. | X | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ | 9,006.00 |
| 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. | | ORGANIZATION | \$ | | |
| 9. | | \$ | | | |
| 10. | X | \$ | 9,106.55 | | |
| 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 | \$ | |
| | | | | | |

| | MONET | ARY POLITICAL CO | | SCHEDULE A | | | |
|---|-------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|--------------------|-------------------------------------------|-----------------------------|------------------------------------------------|------------|
| | The Instru | ction Guide explains how to | complete this form | n. | 1 | Total pages Schedule A1: Sch: 1/4 Rpt: 4/13 | |
| 2 | FILER NAME West Housto | on Democratic Club | 3 | Filer ID (Ethics Commission 00043028 | on Filers) | | |
| 4 | Date 08/28/2024 | | | | 7 | Amount of Contribution (\$) | \$250.00 |
| 8 | Principal occu | Houston, TX 77077 pation / Job title (See Instructions) | l _a | Employer (See Instructions | | | |
| • | | pation 7 300 title (See Instructions) | | Hines Securities, Inc. | ·) | | |
| | Date 09/19/2024 | | | | | Amount of Contribution (\$) | \$1,000.00 |
| | Principal occu | Bellaire, TX 77011 pation / Job title (See Instructions) | | Employer (See Instructions | <u> </u> | | |
| | Judge | , | | Harris County | , | | |
| | Date 08/23/2024 | Full name of contributor out-of-state PAC (ID#:) Goldstein, Robert Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$250.00 |
| | | Houston, TX 77082 | | | | | |
| | Principal occu CPA | pation / Job title (See Instructions) | | Employer (See Instructions Self | i) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 09/05/2024 Griffin, Alyson Contributor address; City; State; Zip Code Houston, TX 77024 | | | | Amount of Contribution (\$) | \$375.00 | |
| | | | | Employer (See Instructions Crosscounty |) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 09/15/2024 Hightower, Richard (Judge) Contributor address; City; State; Zip Code Houston, TX 77025 | | | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu Justice | pation / Job title (See Instructions) | | Employer (See Instructions State of Texas | 5) | | |
| | | | • | | | | |

| MONETARY POLITICAL CONTRIBUTIONS | | | | | | SCHEDULE A1 | | | |
|----------------------------------|------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-------------------------------------|------------------------------------------------|-------------------------------------------|-----------------------------------------------|-----------------------------|-----------|--|
| | The Instruc | ction Guide explains how | 1 | Total pages Schedule A1: Sch: 2/4 Rpt: 5/13 | | | | | |
| 2 | FILER NAME | | | | | 3 | Filer ID (Ethics Commission | n Filers) | |
| | West Housto | on Democratic Club | | | | | 00043028 | | |
| 4 | Date 08/21/2024 | 5 Full name of contributor Hilton, Jeff (Mr.)6 Contributor address; City; St | out-of-state PAC (ID#:ate; Zip Code | |) | 7 | Amount of Contribution (\$) | \$250.00 | |
| 8 | Principal occu | Houston, TX 77077 pation / Job title (See Instructions |) T | 9 | Employer (See Instructions |) | | | |
| Ü | Consultant | pation / out the (occ mandehoris | , | • | Self | ,, | | | |
| | Date 08/22/2024 | e Full name of contributor out-of-state PAC (ID#:) | | | | | Amount of Contribution (\$) | \$250.00 | |
| | Deinsinal assu | Houston, TX 77077 | , I | | Franks and (Co.s. Instructions | <u></u> | | | |
| | | pation / Job title (See Instructions |) | | Employer (See Instructions self | 5) | | | |
| | | | | | | | | | |
| | Date 07/25/2024 | Full name of contributor out-of-state PAC (ID#:) Jenkins, Gale Contributor address; City; State; Zip Code | | | | | Amount of Contribution (\$) | \$250.00 | |
| | | Houston, TX 77077 | | | | | | | |
| | Principal occu None | pation / Job title (See Instructions |) | | Employer (See Instructions | s) | | | |
| | Date 10/15/2024 | O/15/2024 Manor, Jeralynn (Judge) Contributor address; City; State; Zip Code | | | | | Amount of Contribution (\$) | \$250.00 | |
| | | | | | Employer (See Instructions State of Texas | <u> </u> | | | |
| | Date 10/11/2024 | rate Full name of contributor out-of-state PAC (ID#:) | | | | | Amount of Contribution (\$) | \$500.00 | |
| | Principal occupation / Job title (See Instructions) None Employer (See Instruction N/A | | | | | <u>(</u> | | | |
| | | | | | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | | SCHEDULE A1 | | | |
|---------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|---|--------------------------------------------------|-----------------------------------------------|-----------------------------|----------|
| | The Instruc | ction Guide explains how to complete this f | 1 | Total pages Schedule A1: Sch: 3/4 Rpt: 6/13 | | | |
| 2 | FILER NAME West Housto | on Democratic Club | 3 | Filer ID (Ethics Commission 00043028 | n Filers) | | |
| 4 | Date 10/05/2024 | 5 Full name of contributor out-of-state PAC (ID#:) | | | | Amount of Contribution (\$) | \$250.00 |
| 8 | Principal occu | Houston, TX 77027 pation / Job title (See Instructions) | 9 | Employer (See Instructions | s) | | |
| | Attorney | | | Nicole Perdue | | | |
| | Date 10/09/2024 | | | | | Amount of Contribution (\$) | \$250.00 |
| | Dringing con | Houston, TX 77006 | _ | Employer (See Instructions | <u>, </u> | | |
| | Justice | pation / Job title (See Instructions) | | State of Texas | o) | | |
| | Date 11/13/2024 | Full name of contributor out-of-state PAC (ID#:) Turner, Sylvester (The Honorable) Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$250.00 |
| | | Houston, TX 77008 | | | | | |
| | Principal occu Congressma | pation / Job title (See Instructions) un-elect | | Employer (See Instructions US House of Represent | • | /es | |
| | Date 09/14/2024 | ate Full name of contributor out-of-state PAC (ID#:) | | | | Amount of Contribution (\$) | \$250.00 |
| Principal occupation / Job title (See Instructions) Employer (See Instructions) | | | | Employer (See Instructions Harris County | 5) | | |
| | Date Full name of contributor out-of-state PAC (ID#:) 09/04/2024 Wright, Colby Contributor address; City; State; Zip Code Katy, TX 77449 | | | | | Amount of Contribution (\$) | \$250.00 |
| | Principal occu Marketing | pation / Job title (See Instructions) | | Employer (See Instructions Self | 5) | | |
| | | | | | | | |

| MONET | TARY POLITICAL CONTRIBUTION | | SCHEDULE A1 | | |
|--------------------|--------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| The Instru | ction Guide explains how to complete this | m. | 1 | Total pages Schedule A1: Sch: 4/4 Rpt: 7/13 | |
| | | | | 3 | Filer ID (Ethics Commission Filers) 00043028 |
| Date 09/18/2024 | Full name of contributor |) | 7 | Amount of Contribution (\$) \$500.00 | |
| Principal occu | Katy, TX 77449 upation / Job title (See Instructions) | 9 | Employer (See Instructions | <u> </u> | |
| Marketing | | | Self | _ | |
| | | | | | |
| | The Instru FILER NAME West Houst Date 09/18/2024 | The Instruction Guide explains how to complete this factorial files (Instruction Guide explains how to complete this factorial files) FILER NAME West Houston Democratic Club Date 09/18/2024 5 Full name of contributor out-of-state PAC (ID#: 09/18/2024 Wright, Colby 6 Contributor address; City; State; Zip Code Katy, TX 77449 Principal occupation / Job title (See Instructions) | The Instruction Guide explains how to complete this form FILER NAME West Houston Democratic Club Date 09/18/2024 5 Full name of contributor out-of-state PAC (ID#: 09/18/2024 Wright, Colby 6 Contributor address; City; State; Zip Code Katy, TX 77449 Principal occupation / Job title (See Instructions) | West Houston Democratic Club Date 5 Full name of contributor | The Instruction Guide explains how to complete this form. FILER NAME West Houston Democratic Club Date 09/18/2024 Katy, TX 77449 Principal occupation / Job title (See Instructions) 1 3 3 4 7 7 7 8 9 Employer (See Instructions) |

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

| | Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | mmittee | Legal Se | | • | | Vages | e /Contract Labor ete this form. | | Travel Out of Di OTHER (enter a | strict category not listed ab | ove) |
|---|--------------------------------------------------------------------------------------------|----------|----------------|-----------|--------------------|-------------------|------------|-----------|----------------------------------------|-----------|-------------------------------------------|----------------------------------|-------------|
| 1 | Total pages Schedule F1: | 2 | FILER NAME | | | | | | | 3 | Filer ID | (Ethics Commiss | ion Filers) |
| | Sch: 1/6 Rpt: 8/13 | | West Houst | | mocratic C | lub | | | | | 00043028 | • | ŕ |
| 4 | Date | 5 | Payee name | | | | | | | | | | |
| | 12/14/2024 | | Act Blue | | | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee addres | | City; | State | e; Zip Co | ode | | | | | |
| | \$83.21 | | P.O. Box 81 | .226 | | | | | | | | | |
| | Expenditure from corporate funds | | Summerville | e, MA (| 02114 | | | | | | | | |
| 8 | PURPOSE | (a) | Category (Se | ee Catego | ries listed at the | e top of this sch | hedule) | (b) | Description | | | | |
| | OF EXPENDITURE | | Accounting/ | Bankir | ng | | | | 브 | | | plete Schedule T. | |
| | | | | | | | | | Donation coll | | , officeholder living | j expense | |
| | | | | | | | | | 20.100.01.00.1 | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Offi | ceholde | er name | (| Office sou | l ight | | | Office h | eld | |
| | experiditure to benefit C/Or | ' | | | | | | | | | | | |
| | Date | | Payee name | | | | | | | | | | |
| | 10/16/2024 | | Amazon | | | | | | | | | | |
| | Amount (\$) | | Payee addres | ss; | City; | State | ; Zip Co | ode | | | | | |
| | \$46.31 | | P.O. Box 81 | .226 | | | | | | | | | |
| _ | ■ Evpanditura from | | | | | | | | | | | | |
| L | Expenditure from corporate funds | | Seattle, WA | 98108 | 3 | | | | | | | | |
| | PURPOSE | (a) | Category (Se | ee Catego | ries listed at the | e top of this sch | hedule) | (b) | Description | | | | |
| | OF EXPENDITURE | | Event Expe | | | | | | = | | | plete Schedule T. | |
| | - | | | | | | | | Sign holders | , TX, | , officeholder living | g expense | |
| | | | | | | | | | Sign noiders | | | | |
| | Complete ONLY if direct | <u> </u> | Candidate/Offi | ceholde | er name | | Office sou | laht | | | Office h | eld. | |
| | expenditure to benefit C/O | | Sandidate/Oni | conorac | or ridine | | Onice Soc | igiit | | | Onice ii | olu . | |
| | Date | | Payee name | | | | | | | | | | |
| | 12/27/2024 | | Bank of Am | erica | | | | | | | | | |
| | Amount (\$) | | Payee addres | ss; | City; | State | e; Zip Co | ode | | | | | |
| | \$80.00 | | 11288 West | theime | r Rd | | | | | | | | |
| | | | | | | | | | | | | | |
| | Expenditure from corporate funds | | Houston, T | < 7704 | 2 | | | _ | | | | | |
| | PURPOSE OF | (a) | Category (Se | | | e top of this sch | hedule) | (b) | Description | | | | |
| | EXPENDITURE | | Accounting/ | Bankir | ng | | | | = | | ide of Texas. Con , officeholder livin | plete Schedule T. | |
| | | | | | | | | | Fees | , , , , , | ,soriolaer iivilii | , _nponso | |
| | | | | | | | | | | | | | |
| | Complete ONLY if direct | | Candidate/Offi | ceholde | er name | (| Office sou | <u> </u> | | | Office h | eld | |
| | expenditure to benefit C/O | Н | | | | | | - | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |

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 (Contract Labor,

nt Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category not listed above)

| Credit Card Payment | The Instruction Guide explains how to complete this form. |
|--------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: | · · · · · · · · · · · · · · · · · · · |
| Sch: 2/6 Rpt: 9/13 | West Houston Democratic Club 00043028 |
| 4 Date | 5 Payee name |
| 12/30/2024 | Bank of America |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$80.00 | 11288 Westheimer Rd |
| | |
| Expenditure from corporate funds | Houston, TX 77042 |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Fees |
| | |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experialitate to benefit 6/01 | |
| Date | Payee name |
| 10/16/2024 | Best Buy |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$8.65 | 2480 S Texas 6 |
| | |
| Expenditure from corporate funds | Houston, TX 77077 |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Cables |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| Date | Payee name |
| 11/29/2024 | Fadis Restaurant |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$365.00 | 12360 Westheimer Rd |
| Ψ303.00 | 12000 Westlemer Nu |
| Expenditure from corporate funds | Houston, TX 77077 |
| 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 Meetings |
| | iviceurigs |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/OI | |
| | |
| | |
| | |

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

| Candidate/Officeholder/Politica Credit Card Payment | Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. |
|---------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 Total pages Schedule F1: | 2 FILER NAME 3 Filer ID (Ethics Commission Filers) |
| Sch: 3/6 Rpt: 10/13 | West Houston Democratic Club 00043028 |
| 4 Date | 5 Payee name |
| 12/14/2024 | Fornos Restaurant |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$1,008.46 | 10001 Westheimer Rd |
| | no. 1202 |
| Expenditure from corporate funds | Houston, TX 77042 |
| 8 PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Food/Beverage Expense |
| | Check if Austin, TX, officeholder living expense |
| | Meeting |
| | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experience to serious experi | |
| Date | Payee name |
| 08/20/2024 | GoDaddy.com |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$166.17 | 2155 E Godaddy Way |
| | |
| Expenditure from corporate funds | Tempe, AZ 85284 |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| OF EXPENDITURE | Office Overhead/Rental Expense |
| EXI ENDITORE | Check if Austin, TX, officeholder living expense |
| | Web site |
| | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sought Office held |
| experience to benefit even | |
| Date | Payee name |
| 10/17/2024 | HPD |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$720.00 | 1200 Travis Street |
| | |
| Expenditure from corporate funds | Houston, TX 77002 |
| PURPOSE | |
| OF | (a) Category (See Categories listed at the top of this schedule) (b) Description Fivent Expense Check if travel outside of Texas. Complete Schedule T. |
| EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Security Guards |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | |
| | |
| | |
| | |

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

| 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: 11/13 | West Houston Democratic Club 00043028 |
| 4 Date | 5 Payee name |
| 08/23/2024 | Harris County Dem. Party |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Code |
| \$2,575.00 | 4619 Lyons Ave. |
| | |
| Expenditure from corporate funds | Houston, TX 77020 |
| | |
| 8 PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | Attendance at event |
| | Allendance at event |
| | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office sought Office held |
| Date | Payee name |
| | Payee name |
| 10/12/2024 | Micro Center |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$254.38 | 5305 S Rice Ave |
| | |
| Expenditure from corporate funds | Houston, TX 77081 |
| 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. |
| LAFENDITORE | Check if Austin, TX, officeholder living expense |
| | A/V equipment |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| Date | Payee name |
| | Payee name |
| 10/17/2024 | Office Depot |
| Amount (\$) | Payee address; City; State; Zip Code |
| \$523.87 | 2602 ELDRIDGE PKWY. SUITE C |
| | |
| Expenditure from | Houston, TX 77082 |
| corporate funds | |
| PURPOSE OF | (a) Category (See Categories listed at the top of this schedule) (b) Description |
| EXPENDITURE | Event Expense Check if travel outside of Texas. Complete Schedule T. |
| | Check if Austin, TX, officeholder living expense |
| | Blue Surge Rally |
| | |
| Complete ONLY if direct | Candidate/Officeholder name Office sought Office held |
| expenditure to benefit C/O | 1 |
| | |
| | |
| | |

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

1

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a category not listed above)

| Credit Card Payment | | The Instruction Guide explains how to complete this form. | | , | , |
|--------------------------|---|-----------------------------------------------------------|---|----------|----------------------------|
| Total pages Schedule F1: | 2 | FILER NAME | 3 | Filer ID | (Ethics Commission Filers) |
| Sch: 5/6 Rpt: 12/13 | | West Houston Democratic Club | | 00043028 | |
| Date | 5 | Payee name | | | |
| 08/22/2024 | | SendinBlue | | | |

EXPENDITURE CATEGORIES FOR BOX 8(a)

| 4 Date 08/22/2024 | 5 Payee name SendinBlue | |
|------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| 6 Amount (\$) \$145.00 | 7 Payee address; City; State; Zip Co 106 Boulevard Haussmann | de |
| Expenditure from corporate funds | Paris 75008 France | |
| 8 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 E-mail system and deposit fees. |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sou | ght Office held |
| Date 10/17/2024 | Payee name Town and Country Party Rentals | |
| Amount (\$) \$620.24 Expenditure from corporate funds | Payee address; City; State; Zip Co 1110 Henderson St, Bld. B Suite 200 Houston, TX 77077 | de |
| 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 Chair rental |
| Complete ONLY if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sou | ght Office held |
| Date 12/24/2024 | Payee name USPS | |
| Amount (\$) \$58.00 | Payee address; City; State; Zip Co 12655 Whittington | de |
| Expenditure from corporate funds | Houston, TX 77077 | |
| 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 Stamps |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OI | Candidate/Officeholder name Office sou | ght Office held |
| i | | |

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

| Credit Card Payment | The Instruction Guide explains how to co | nplete this form. | OTHER (effet a category not listed above) |
|------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|---------------------|-------------------------------------------------------------------------|
| 1 Total pages Schedule F1: | · | | B Filer ID (Ethics Commission Filers) |
| Sch: 6/6 Rpt: 13/13 | West Houston Democratic Club | | 00043028 |
| 4 Date | 5 Payee name | | |
| 12/16/2024 | Witt Entertainment | | |
| 6 Amount (\$) | 7 Payee address; City; State; Zip Co | de | |
| \$2,270.23 | 1222 Witte Rd. | | |
| | Bld. B Suite 200 | | |
| Expenditure from corporate funds | Houston, TX 77055 | | |
| 8 PURPOSE OF | , | (b) Description | |
| EXPENDITURE | Event Expense | | tside of Texas. Complete Schedule T. "X, officeholder living expense |
| | | Location rental | |
| | | | |
| Complete ONLY if direct expenditure to benefit C/Ol | Candidate/Officeholder name Office soug | yht | Office held |
| Date | Payee name | | |
| 12/27/2024 | Zoom | | |
| Amount (\$) | Payee address; City; State; Zip Co | de | |
| \$102.03 | 55 Almaden Blvd HQ | | |
| Expenditure from corporate funds | San Jose, CA 95113 | | |
| PURPOSE | (a) Category (See Categories listed at the top of this schedule) | (b) Description | |
| OF EXPENDITURE | Event Expense | Check if travel out | tside of Texas. Complete Schedule T. |
| LAFLINDITORL | | | X, officeholder living expense |
| | | Meeting on-line | 9 |
| | | | |
| Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |