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) 00088903 3 COMMITTEE NAME **OFFICE USE ONLY** Democrats of La Porte Date Received **ELECTRONICALLY FILED** 01/10/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 624 S 5th St Date Hand-delivered or Date Postmarked Change of Address La Porte, TX 77571-5058 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Michael NAME NICKNAME LAST **SUFFIX** Maglitto STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 624 S. 5th Street STREET **ADDRESS** (Residence or Business) La Porte, TX 77571 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 624 S. 5th Street MAILING **ADDRESS** La Porte, TX 77571 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (832) 339-3554 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** 10/27/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** X Other Month Day Year Primary Runoff 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)
Democrats of La Porte		000889	03
14 COMMITTEE 1. Candidate	Domodia	l .	
ACTIVITY (Identify by name applicable, classify	or, if y by party.)		
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed		
2.11	A Company		
Measures (Describe by date of election and nat)			
	B. Opposed		
3. Officehold Assisted (Identify by name			
àpplicable, classify	y by party.)		
TOTALS PLEDGES CONTRIB	NITEMIZED POLITICAL CONTRIBUTIONS (OTHER TH S, LOANS, OR GUARANTEES OF LOANS, OR UTIONS MADE ELECTRONICALLY) if this report qualifies for the higher itemization threshold	AN \$	0.00
	POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOA	NS) \$	205.00
EXPENDITURE 3. TOTAL UN	NITEMIZED POLITICAL EXPENDITURES	\$	0.00
4. TOTAL F	POLITICAL EXPENDITURES	\$	75.00
	DLITICAL CONTRIBUTIONS MAINTAINED AS OF THE REPORTING PERIOD	LAST DAY \$	1,126.35
	RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS A Y OF THE REPORTING PERIOD	S OF THE \$	0.00
16 AFFIDAVIT			
	I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
	Mr.	Michael Maglitto	0
	Signature	of Campaign Tre	asurer
AFFIX NOTARY STAMP / SEA	L ABOVE		
Sworn to and subscribed before me, by	the said	, this the	day
	to certify which, witness my hand and seal of office.		
Signature of officer administering oath	h Printed name of officer administering oath	Title of	officer administering oath

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

			3 of 6
17 COMMITTEE NAME Democrats of La Porte		18 Filer ID 00088903	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETA	ARY POLITICAL CONTRIBUTIONS		\$ 205.00
2. SCHEDULE A2: NON-MC	ONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. X SCHEDULE B: PLEDGED	CONTRIBUTIONS		\$ 12.00
4. SCHEDULE C1: MONETA	ARY CONTRIBUTIONS FROM CORPORATION OR LAB	SOR	\$
5. SCHEDULE C2: NON-MC LABOR ORGANIZATION	DNETARY (IN-KIND) CONTRIBUTIONS FROM CORPOR	RATION OR	\$
6. SCHEDULE C3: MONETA	ARY SUPPORT FROM CORPORATION OR LABOR OR	GANIZATION	\$
7. SCHEDULE C4: NON-MCORGANIZATION	ONETARY SUPPORT FROM CORPORATION OR LABO	R	\$
8. SCHEDULE D: PLEDGED	CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$
9. SCHEDULE E: LOANS			\$
10. X SCHEDULE F1: POLITIC	AL EXPENDITURES FROM POLITICAL CONTRIBUTION	NS	\$ 75.00
11. SCHEDULE F2: UNPAID	INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHA	ASE OF INVESTMENTS FROM POLITICAL CONTRIBUT	TIONS	\$
13. SCHEDULE F4: EXPEND	ITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLIT	FICAL EXPENDITURES FROM POLITICAL CONTRIBUT	TIONS	\$
15. SCHEDULE K: INTEREST TO FILER	, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	RETURNED	\$

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/6	
2	FILER NAME Democrats of			3	Filer ID (Ethics Commission Filers) 00088903	
4	Date 11/11/2024	 5 Full name of contributor out-of-state PAC (ID#:_Alban, Sheila 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$105.00
8	Principal occu	La Porte, TX 77571 pation / Job title (See Instructions)	9 Employer (See Instructions)		
_	retired book		retired	,		
	Date 10/27/2024	Full name of contributor out-of-state PAC (ID#: Dobberstein, Rhett (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00
		Baytown, TX 77521				
	Principal occu unknown	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/10/2024	Full name of contributor out-of-state PAC (ID#:_ Hill, Sharon (Ms.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$35.00
		La Porte, TX 77571				
	Principal occu unknown	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/20/2024	Full name of contributor out-of-state PAC (ID#:_ Sendejo, Martha (Ms.) Contributor address; City; State; Zip Code Friendswood, TX 77546)		Amount of Contribution (\$)	\$35.00
	Principal occu unknown	pation / Job title (See Instructions)	Employer (See Instructions)		

PLEDGED CONTRIBUTIONS	SCHEDULE	В
The Instruction Guide explains how to comple	te this form. 1 Total pages Schedule B: Sch: 1/1 Rpt: 5/6	
2 FILER NAME Democrats of La Porte	3 Filer ID (Ethics Commission Filers) 00088903	
TOTAL OF UNITEMIZED PLEDGES	\$	0.00
5 Date 6 Full name of pledgorout-of-state PAC (ID#:_Duncan, Kathleen (Ms.) 7 Pledgor Address; City; State; Zip Code	8 Amount of pledge (\$) 9 In-kind description (If applicable) 1 1 1 1 1 1 1 1 1	
La Porte, TX 77571	Check if travel outside of Texas. Complete Sch	hedule T.
10 Principal occupation / Job title (See Instructions) administrative assistant	11 Employer (See Instructions) retired	

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 Git/Jawards/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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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: 1/1 Rpt: 6/6	Democrats of La Porte 00088903
4 Date	5 Payee name
12/09/2024	La Porte Parks & Recreation
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$75.00	604 W. Fairmont Pkwy.
Expenditure from corporate funds	La Porte, TX 77571
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Rental of meeting space
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H