#### 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) 00088772 3 COMMITTEE NAME **OFFICE USE ONLY** Bexar County Democrats PAC Date Received **ELECTRONICALLY FILED** 01/15/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1150 N. Loop 1604 West Date Hand-delivered or Date Postmarked Ste. 108-230 Change of Address San Antonio, TX 78248 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Christopher NAME NICKNAME LAST **SUFFIX** Koob STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1150 N. Loop 1604 West STREET **ADDRESS** Ste 108-230 (Residence or Business) San Antonio, TX 78248 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1150 N. Loop 1604 West MAILING **ADDRESS** Ste 108-230 San Antonio, TX 78248 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (202) 552-0221 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 Day Month Day Year Month **COVERED THROUGH** 10/27/2024 12/31/2024 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

L2 COMMITTEE NAME				13 Filer ID	
Bexar County Democra	ts PAC			000887	772
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.)	7t. Capported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
L5 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	OR GUARANTEES  MADE ELECTRONIC	CALLY)	\$	80.00
	2. TOTAL POLITICA	L CONTRIBUTION		\$	41,260.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPE	NDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURE	ES	\$	46,901.82
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN		MAINTAINED AS OF THE LAST	DAY \$	6,036.97
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE		DUTSTANDING LOANS AS OF OD	THE \$	0.00
L6 AFFIDAVIT	<u> </u>			<u> </u>	
		true a	ear, or affirm, under penalty of pe and correct and includes all info er Title 15, Election Code.		
			Christo	nhar Kaab	
			Signature of Ca	pher Koob	acurer
AFFIX NOTARY	STAMP / SEAL ABOVE		Signature of Ge	ampaign Tre	asurer
	leafana na a buatha asid			46:- 46	ala
	_, 20, to certify \		, t	this the	day
oi <u>-</u>	_, 20, to certify (	willen, withess my n	and and sear of office.		
Signature of officer ad	ministering oath	Printed name of off	ficer administering oath	Title of	officer administering oath

# **SUBTOTALS - GPAC**

# FORM GPAC COVER SHEET PG 3

			OVER OFFEET	3 of 25
17 COMMIT	TEE NAME	18 Filer ID	(Ethics Commission	Filers)
Bexar C				
19 SCHEDU NAME OF	SUBTOTAL AM	IOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	11,260.00
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	\$	46,901.82
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	16.64

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1	
	The Instruc	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/25
2	FILER NAME Bexar Count	y Democrats PAC			3	Filer ID (Ethics Commission Filers) 00088772
4	Date 11/06/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$) \$100.00
_	Deireitad	San Antonio, TX 78230	_	Fundament (Construction		
8	Veterinarian	pation / Job title (See Instructions)	9	Employer (See Instructions Self Employed	5)	
	Date 11/04/2024	Full name of contributor	••••	)		Amount of Contribution (\$) \$20.00
	Principal occu	San Antonio, TX 78249 pation / Job title (See Instructions)		Employer (See Instructions	 ;)	
	Retired			Not Employed		
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#:_Ruiz, Belinda  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$) \$10.00
		San Antonia, TX 78232				
	Principal occu Medical Cod	pation / Job title (See Instructions) er		Employer (See Instructions HBD	s)	
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID#:_ Russell, Evon Contributor address; City; State; Zip Code San Antonio, TX 78254				Amount of Contribution (\$) \$50.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)	
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Majority PAC Contributor address; City; State; Zip Code Washington, DC 20003		)		Amount of Contribution (\$) \$30,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/25	
2	FILER NAME Bexar Count	y Democrats PAC		3	Filer ID (Ethics Commissi 00088772	on Filers)
4	Date 11/26/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$6,500.00
•	Deimainal accu	Washington, DC 20003	O Familia va (Con lineta vationa			
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/02/2024	Full name of contributor	)		Amount of Contribution (\$)	\$2,000.00
		Washington, DC 20003				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/20/2024	Full name of contributor out-of-state PAC (ID#: Texas Majority PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
		Washington, DC 20003		_		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made B 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:	
Sch: 1/19 Rpt: 6/25	Bexar County Democrats PAC 00088772
4 Date	5 Payee name
11/06/2024	Actblue Technical Services
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3.95	366 Summer St
Expenditure from corporate funds	Somerville, MA 02144-3132
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.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Credit Card Processing Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
10/29/2024	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$14.00	275 7th Ave
X Expenditure from corporate funds	New York, NY 10001-6708
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
	Bank Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/29/2024	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$70.25	275 7th Ave
Expenditure from corporate funds	New York, NY 10001-6708
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.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Bank Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

## 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 Legal Services 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 complete this form.	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	_
Sch: 2/19 Rpt: 7/25	Bexar County Democrats PAC 00088772	
4 Date	5 Payee name	
11/27/2024	Amalgamated Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$14.00	275 7th Ave	
X Expenditure from corporate funds	New York, NY 10001-6708	
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	
	Bank Fees	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
		_
Date	Payee name	
11/27/2024	Amalgamated Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$49.40	275 7th Ave	
- Evenanditura from		
Expenditure from corporate funds	New York, NY 10001-6708	
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.	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Bank Fees	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	n	
Date	Payee name	
12/30/2024	Amalgamated Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$14.00	275 7th Ave	
X Expenditure from corporate funds	New York, NY 10001-6708	
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.	
EXI ENDITORE	Check if Austin, TX, officeholder living expense	
	Bank Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experialiture to benefit C/Oi		

## SCHEDULE F1

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 3/19 Rpt: 8/25	Bexar County Democrats PAC 00088772
4 Date	5 Payee name
12/30/2024	Amalgamated Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$31.40	275 7th Ave
Expenditure from corporate funds	New York, NY 10001-6708
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
	Bank Fees
O Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
10/28/2024	Canva
Amount (\$)	Payee address; City; State; Zip Code
\$30.00	3212 E Cesar Chavez St
	Ste 1300
Expenditure from corporate funds	Austin, TX 78702
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Software Subscription  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Software Subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
11/29/2024	Canva
Amount (\$)	Payee address; City; State; Zip Code
\$30.00	3212 E Cesar Chavez St
	Ste 1300
Expenditure from corporate funds	Austin, TX 78702
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Software Subscription  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Software Subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Transportation Equipment & Related Expense Travel in District Travel Out of District

Solicitation/Fundraising Expense

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services Candidate/Officeholder/Political Committee 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 Filer ID (Ethics Commission Filers) Sch: 4/19 Rpt: 9/25 Bexar County Democrats PAC 00088772 4 Date Payee name 11/22/2024 Chipotle 6 Amount (\$) Payee address; City; State; Zip Code \$78.09 610 Newport Center Dr Expenditure from Newport Beach, CA 92660 corporate funds **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meals Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/02/2024 Google Amount (\$) Payee address; City; State; Zip Code \$98.24 1600 Amphitheatre Pkwy Expenditure from Mountain View, CA 94043 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Software Subscription **EXPENDITURE** Check if Austin, TX, officeholder living expense Software Subscription Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/04/2024 Google Amount (\$) Payee address; City; State; Zip Code \$115.13 1600 Amphitheatre Pkwy Expenditure from corporate funds Mountain View, CA 94043 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Software Subscription **EXPENDITURE** Check if Austin, TX, officeholder living expense Software Subscription Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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
OTHER (other a cottographed listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal manua Cabadala E4.	
1 Total pages Schedule F1: Sch: 5/19 Rpt: 10/25	2 FILER NAME Bexar County Democrats PAC  3 Filer ID (Ethics Commission Filers) 00088772
4 Date	5 Payee name
10/31/2024	Johnson, Claude
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,717.68	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
	Campaigh Stail Salaries
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/15/2024	Johnson, Claude
Amount (\$)	Payee address; City; State; Zip Code
` '	, ,
\$1,858.35	1150 N. Loop 1604 West
Expenditure from	Ste 108-230
corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/29/2024	Johnson, Claude
Amount (\$)	Payee address; City; State; Zip Code
\$1,576.98	1150 N. Loop 1604 West
Expenditure from	Ste 108-230
corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	4

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District - Gift/Awards/Memorials Expense Printing Expense Travel Out of District Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/19 Rpt: 11/25	Bexar County Democrats PAC 00088772
4 Date	5 Payee name
10/30/2024	MBA Consulting Group
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	611 Pennsylvania Ave SE
Expenditure from	# 143
corporate funds	Washington, DC 20003-4303
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Compliance Services
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	ł
Date	Payee name
12/03/2024	MBA Consulting Group
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	611 Pennsylvania Ave SE
— Formanditura from	# 143
X Expenditure from corporate funds	Washington, DC 20003-4303
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Consulting Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Compliance Services
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	ł
Date	Dayon nama
12/06/2024	Payee name NGP VAN
Amount (\$)	Payee address; City; State; Zip Code
\$106.60	PO Box 392264
Evnonditure from	
Expenditure from corporate funds	Pittsburgh, PA 15251-9264
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Software Subscription  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Software Subscription
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 Contributions/ Donations M Candidate/Officeholder/ Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	cal Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed about	ove)
	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commissi	on Filers)
Sch: 7/19 Rpt: 12/25	Bexar County Democrats PAC 00088772	
4 Date	5 Payee name	
10/31/2024	Ochoa, Amelia	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,891.00	1150 N. Loop 1604 West	ĺ
	Ste 108-230	
Expenditure from corporate funds	San Antonio, TX 78248	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Campaign Staff Salaries	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Payee name	
11/15/2024	Ochoa, Amelia	
Amount (\$)	Payee address; City; State; Zip Code	
\$2,051.70		
42,0020	Ste 108-230	
Expenditure from		
corporate funds	San Antonio, TX 78248	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	ĺ
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Campaign Staff Salaries	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	DH .	
Date	Payee name	
10/31/2024	Patacsil, Adriana	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,726.66		ĺ
, ,	Ste 108-230	
Expenditure from		
corporate funds	San Antonio, TX 78248	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Campaign Staff Salaries	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	DH .	

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 8/19 Rpt: 13/25	Bexar County Democrats PAC 00088772
4 Date	5 Payee name
11/15/2024	Patacsil, Adriana
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,867.36	1150 N. Loop 1604 West
— Consenditure from	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Compaign Stoff Salarias
	Campaign Staff Salaries
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	
Date	Payee name
11/29/2024	Patacsil, Adriana
Amount (\$)	Payee address; City; State; Zip Code
\$1,585.96	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Campaign Staff Salaries
	Campaign clain calaries
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/13/2024	Patacsil, Adriana
Amount (\$)	Payee address; City; State; Zip Code
\$1,797.01	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Candidate/Officeholder/Politica Credit Card Payment	al 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: 9/19 Rpt: 14/25	Bexar County Democrats PAC 00088772	
4 Date	5 Payee name	
12/31/2024	Patacsil, Adriana	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,585.96	1150 N. Loop 1604 West	
	Ste 108-230	
Expenditure from corporate funds	San Antonio, TX 78248	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	
EXI ENDITORE	Check if Austin, TX, officeholder living expense	
	Campaign Staff Salaries	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/30/2024	Payroll Data Processing	
Amount (\$)	Payee address; City; State; Zip Code	
\$58.73	4224 Henderson Blvd	
Expenditure from corporate funds	Tampa, FL 33629-5611	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor	
EXI ENDITORE	Check if Austin, TX, officeholder living expense	
	Payroll Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
Date	Payee name	
10/30/2024	Payroll Data Processing	
Amount (\$)	Payee address; City; State; Zip Code	
\$3,720.07	4224 Henderson Blvd	
Expenditure from corporate funds	Tampa, FL 33629-5611	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Payroll Taxes	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experiorare to benefit C/OI		
1		

### 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

inting Expense Trave inting Expense Trave ilaries/Wages/Contract Labor OTH

Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/19 Rpt: 15/25	Bexar County Democrats PAC 00088772
4 Date	5 Payee name
11/14/2024	Payroll Data Processing
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3,797.25	4224 Henderson Blvd
Expenditure from corporate funds	Tampa, FL 33629-5611
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<del>1</del>
Date	Payee name
11/14/2024	Payroll Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$58.73	4224 Henderson Blvd
Ψ30.73	4224 Heriderson bivd
Expenditure from corporate funds	Tampa, FL 33629-5611
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll Fee
	l ayron r co
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
Date	Davisa nama
11/27/2024	Payee name Payroll Data Processing
	, ,
Amount (\$)	Payee address; City; State; Zip Code 4224 Henderson Blvd
\$53.23	4224 Heriderson Bivd
Expenditure from corporate funds	Tampa, FL 33629-5611
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
LA LIBITORE	Check if Austin, TX, officeholder living expense
	Payroll Fee
Complete CAU V if dire-+	Condidate/Officeholder name Office county
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

## 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

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: 11/19 Rpt: 16/25	Bexar County Democrats PAC 00088772
4 Date	5 Payee name
11/27/2024	Payroll Data Processing
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,202.35	4224 Henderson Blvd
Expenditure from corporate funds	Tampa, FL 33629-5611
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
	T dyroll Taxes
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Oi	
Date	Payee name
12/13/2024	Payroll Data Processing
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$815.05	4224 Henderson Blvd
Expenditure from	
corporate funds	Tampa, FL 33629-5611
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Davies name
12/13/2024	Payee name
12/13/2024	Payroll Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$50.48	4224 Henderson Blvd
Expenditure from corporate funds	Tampa, FL 33629-5611
PURPOSE	·
OF	, <u> </u>
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Fee
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 -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Printing Expense Printing Expense Select Expense Select Merce (Contract Lobor Contract Lobor Expense Printing Expense Printing

Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 12/19 Rpt: 17/25	Bexar County Democrats PAC 00088772
4 Date	5 Payee name
12/30/2024	Payroll Data Processing
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$62.73	4224 Henderson Blvd
Expenditure from	
corporate funds	Tampa, FL 33629-5611
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
12/30/2024	Payroll Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$567.04	4224 Henderson Blvd
, , , ,	
Expenditure from corporate funds	Tampa, FL 33629-5611
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
10/31/2024	Rivera, Leslie
Amount (\$)	Payee address; City; State; Zip Code
\$1,717.68	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete CNII V if direct	Candidate/Officeholder name Office sought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Politi

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid			xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 13/19 Rpt: 18/25		Bexar Coun	ty Democrats PA	С					00088772	
4	Date	5	Payee name								
	11/15/2024		Rivera, Les	lie							
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode				
	\$1,858.35		1150 N. Loc	op 1604 West							
	Expenditure from		Ste 108-230	)							
L	corporate funds		San Antonio	o, TX 78248							
8	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Salaries/Wa	ages/Contract Lab	or			<b>=</b>		de of Texas. Comp	
								Campaign Sta		officeholder living Salaries	- copenac
										_ ,	
9	Complete ONLY if direct		Candidate/Offi	ceholder name	0	office sou	<u>I</u> ught			Office he	eld
	expenditure to benefit C/O	<del> </del>									
	Date		Payee name					<u> </u>			
	11/04/2024		Slack								
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode				
	\$46.64		500 Howard	d Street							
	- Formanditure for the										
	Expenditure from corporate funds		San Francis	sco, CA 94105							
	PURPOSE	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Software Su	ubscription				<b>□</b>		de of Texas. Comp	
								Software Sub		officeholder living	expense
								John Mile July	.001		
	Complete ONLY if direct		Candidate/Offi	ceholder name	0	office sou	ught			Office he	eld
	expenditure to benefit C/O	H —									
	Date		Payee name								
L	12/03/2024	L	Slack								
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode				
	\$19.90		500 Howard	d Street							
_	Expenditure from										
L	corporate funds		San Francis	sco, CA 94105							
	PURPOSE OF	(a)	Category (Se	ee Categories listed at the	top of this sche	edule)	(b)	Description			
	EXPENDITURE		Software Su	ubscription				ш		de of Texas. Comp	•
								Software Sub		officeholder living	l evheuse
									J- <b>J-</b> 1	lease.	
	Complete ONLY if direct	Щ	Candidate/Offi	ceholder name	0	office sou	l ught			Office he	eld
	expenditure to benefit C/O						•				

## SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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 con	pplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 14/19 Rpt: 19/25	Bexar County Democrats PAC	00088772
4 Date	5 Payee name	<u>'</u>
11/12/2024	SmallPDF	
6 Amount (\$)	7 Payee address; City; State; Zip Coo	le
\$40.00	Steinstrasse 21	
Expenditure from corporate funds	Zurich Switzerland	
<u> </u>		11.A. –
8 PURPOSE OF	, -	(b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Software Subscription	Check if Austin, TX, officeholder living expense
		Software Subscription
9 Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O	<del>-</del>	
Date	Payee name	
12/10/2024	SmallPDF	
		la .
Amount (\$)	, ,,	le
\$40.00	Steinstrasse 21	
Expenditure from		
corporate funds	Zurich Switzerland	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Software Subscription	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Software Subscription
		Software Subscription
Complete ONLY if direct	Candidate/Officeholder name Office soug	ht Office held
expenditure to benefit C/O	<u> </u>	office field
Date	Payee name	
11/05/2024	Stamps.com	
Amount (\$)	Payee address; City; State; Zip Coo	le
\$20.19	1990 E Grand Ave	
Expenditure from		
corporate funds	El Segundo, CA 90245	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Postage
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht Office held
SAPORGICATO TO DOTTORE O/OI	•	

## 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 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.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 15/19 Rpt: 20/25	Bexar County Democrats PAC	00088772
4 Date	5 Payee name	<b>'</b>
12/04/2024	Stamps.com	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$20.19	1990 E Grand Ave	
¥20.20	2000 2 0.0.10 / 110	
Expenditure from corporate funds	El Segundo, CA 90245	
8 PURPOSE		
OF	(a) Category (See Categories listed at the top of this schedule)  Solicitation/Fundraising Expense	ption ck if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Conditation in analysing Expense	ck if Austin, TX, officeholder living expense
	Posta	ge
9 Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	H	
Date	Payee name	
12/11/2024	Stamps.com	
Amount (\$)	Payee address; City; State; Zip Code	
\$3.91	1990 E Grand Ave	
Ψ0.01	1000 E Grand No	
Expenditure from corporate funds	El Segundo, CA 90245	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Descri	ption ck if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Conditation in analysing Expense	ck if Austin, TX, officeholder living expense
	Posta	ge
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	H	
Date	Payee name	
11/22/2024	Starbucks	
Amount (\$)	Payee address; City; State; Zip Code	
\$79.94	2401 Utah Ave S	
¥12.0		
Expenditure from corporate funds	Seattle, WA 98134	
·		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Descri	ption ck if travel outside of Texas. Complete Schedule T.
EXPENDITURE	1 ood/beverage Expense	ck if Austin, TX, officeholder living expense
	Meals	
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	Н	

## 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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Cabadula F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1 Total pages Schedule F1: Sch: 16/19 Rpt: 21/25	2 FILER NAME Bexar County Democrats PAC 3 Filer ID (Ethics Commission Filers) 00088772
4 Date	5 Payee name
10/31/2024	Thomas, Kelly
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,576.03	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
	Campaign Can Canalica
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/15/2024	Thomas, Kelly
Amount (\$)	Payee address; City; State; Zip Code
\$2,507.67	1150 N. Loop 1604 West
Ψ2,001.01	
Expenditure from	Ste 108-230
corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/29/2024	Thomas, Kelly
Amount (\$)	Payee address; City; State; Zip Code
\$2,439.33	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from	
corporate funds	San Antonio, TX 78248
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
-	Compaign Stoff Salaries
	Campaign Staff Salaries
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to belieff G/OI	·

## SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 17/19 Rpt: 22/25	Bexar County Democrats PAC 00088772
4 Date	5 Payee name
12/13/2024	Thomas, Kelly
	•
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$563.61	1150 N. Loop 1604 West
Expenditure from	Ste 108-230
corporate funds	San Antonio, TX 78248
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/28/2024	Uber
Amount (\$)	Payee address; City; State; Zip Code
\$19.30	1455 Market St
\$19.50	1433 Warker St
Expenditure from	
corporate funds	San Francisco, CA 94103-1331
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
	Expense Check if Austin, TX, officeholder living expense  Travel
	Travei
0 1: 01:17:	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/28/2024	Uber
Amount (\$)	Payee address; City; State; Zip Code
\$4.50	1455 Market St
Expenditure from corporate funds	San Francisco, CA 94103-1331
	1
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Transportation Equipment And Related  Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Travel
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 18/19 Rpt: 23/25	Bexar County Democrats PAC 00088772
·	, l
4 Date	5 Payee name
10/31/2024	Uber
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100.23	1455 Market St
Expenditure from corporate funds	San Francisco, CA 94103-1331
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
	Travel
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Н
Date	Payes name
11/04/2024	Payee name Uber
Amount (\$)	Payee address; City; State; Zip Code
\$27.90	1455 Market St
Expenditure from	
corporate funds	San Francisco, CA 94103-1331
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Transportation Equipment And Related
LAPENDITORE	Expense Check if Austin, TX, officeholder living expense
	Travel
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit Gree	
Date	Payee name
11/04/2024	Uber
Amount (\$)	Payee address; City; State; Zip Code
\$82.17	1455 Market St
Expenditure from corporate funds	San Francisco, CA 94103-1331
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Transportation Equipment And Related  Transportation Equipment And Related  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Transportation Equipment And Related  Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Travel
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

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Co	mmittee	Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		ense ges/Contract Labor		Travel in District Travel Out of Dist OTHER (enter a	trict category not listed above)
_	Tatal manage Calculula E4:	_	EU ED MANA		ilue explains i	now to con	ipiete tilis form.	٦,	E11 ID	(Ethics Commission Filess)
1	Total pages Schedule F1:	2		∟ nty Democrats P.	۸			3	Filer ID 00088772	(Ethics Commission Filers)
L	Sch: 19/19 Rpt: 24/25	L			AC				00000772	
4	Date	5	Payee name	е						
	11/05/2024		Wal-Mart							
6	Amount (\$)	7	Payee addre		State;	Zip Cod	e			
	\$34.90		1430 Austi	n Hwy						
	Expenditure from corporate funds		San Anton	io, TX 78209						
8	PURPOSE	(a)	Category (5	See Categories listed at th	ne top of this sch	edule) (	b) Description			
	OF EXPENDITURE			rhead/Rental Exp					ide of Texas. Comp	
	_/						Office Supp		, officeholder living	expense
							Office Supp	JIIES		
_										
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Of	ficeholder name	C	Office soug	nt		Office he	Id
_										

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 25/25 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Bexar County Democrats PAC 00088772 5 Name of person from whom amount is received 8 Amount (\$) Date 11/21/2024 Slack \$11.66 6 Address of person from whom amount is received; City; State; Zip Code San Francisco, CA 94105 Purpose for which amount is received Check if political contribution returned to filer Refund from Vendor Amount (\$) Name of person from whom amount is received Date 12/16/2024 Slack \$4.98 Address of person from whom amount is received; City; State; Zip Code San Francisco, CA 94105 Purpose for which amount is received Check if political contribution returned to filer Refund from Vendor