

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME ACT for Texas Classroom Teachers Association	13 Filer ID (Ethics Commission Filers) 00016361
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 25.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 315.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 10,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 257,770.22
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ann Fickle

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - MPAC

17 COMMITTEE NAME ACT for Texas Classroom Teachers Association		18 Filer ID (Ethics Commission Filers) 00016361
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 315.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 60.00
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 10,500.00
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/12 Rpt: 4/18
2 FILER NAME ACT for Texas Classroom Teachers Association		3 Filer ID (Ethics Commission Filers) 00016361
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ALBA, ERICA <hr/> 6 Contributor address; City; State; Zip Code HUTTO, TX 78634	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Paraprofessional		9 Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AMASON, RODNEY <hr/> Contributor address; City; State; Zip Code AMARILLO, TX 79109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ANDERSON, NICOLE <hr/> Contributor address; City; State; Zip Code THE WOODLANDS, TX 77389	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ARGABRIGHT, HEATHER <hr/> Contributor address; City; State; Zip Code CONROE, TX 77303	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BECNEL, PETER <hr/> Contributor address; City; State; Zip Code LEAGUE CITY, TX 77573	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/12 Rpt: 5/18
2 FILER NAME ACT for Texas Classroom Teachers Association		3 Filer ID (Ethics Commission Filers) 00016361
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BLACKBURN, MELVIN <hr/> 6 Contributor address; City; State; Zip Code AUSTIN, TX 78727	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions)
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRADLEY-MCGOWAN, APRIL <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76502	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BROWN, JENNIFER <hr/> Contributor address; City; State; Zip Code SPRING, TX 77386	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BRUNO, MELISSA <hr/> Contributor address; City; State; Zip Code VINTON, LA 70668	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BURDITT, SAWYER <hr/> Contributor address; City; State; Zip Code LULING, TX 78648	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/12 Rpt: 6/18
2 FILER NAME ACT for Texas Classroom Teachers Association		3 Filer ID (Ethics Commission Filers) 00016361
4 Date 12/03/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CANO, SHERRI	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code GREENVILLE, TX 75402	
8 Principal occupation / Job title (See Instructions) School Nurse		9 Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CITRO, ROBERT	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code MONTGOMERY, TX 77356	
Principal occupation / Job title (See Instructions) Substitute Teacher		Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CONDE, MYRNA	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code EDINBURG, TX 78539	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DEFRIEZ, ABIGALE	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code FORT CAVASOS, TX 76544	
Principal occupation / Job title (See Instructions) Paraprofessional		Employer (See Instructions)
Date 11/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAMOND, SUMMER	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code ORANGE, TX 77632	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/12 Rpt: 7/18
2 FILER NAME ACT for Texas Classroom Teachers Association		3 Filer ID (Ethics Commission Filers) 00016361
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DOYLE, CATHERINE <hr/> 6 Contributor address; City; State; Zip Code SUGAR LAND, TX 77479	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FLAKE, SCHUYLER <hr/> Contributor address; City; State; Zip Code RICHMOND, TX 77407	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FRAZIER (BEZANILLA), COLYN <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77064	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, DIANE <hr/> Contributor address; City; State; Zip Code SUGAR LAND, TX 77478	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GARCIA, GERARDO <hr/> Contributor address; City; State; Zip Code LAREDO, TX 78046	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/12 Rpt: 8/18
2 FILER NAME ACT for Texas Classroom Teachers Association		3 Filer ID (Ethics Commission Filers) 00016361
4 Date 12/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HALL, RODNEY	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code GRAFORD, TX 76449	
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions)
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HAYGOOD, LAURA	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code HOUSTON, TX 77057	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HELGE, NICHOLAS	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code BEN WHEELER, TX 75754	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLCOMB, SARAH	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code DECATUR, TX 76234	
Principal occupation / Job title (See Instructions) Paraprofessional		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOLMAN, ELIZABETH	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code LITTLEFIELD, TX 79339	
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/12 Rpt: 9/18
2 FILER NAME ACT for Texas Classroom Teachers Association		3 Filer ID (Ethics Commission Filers) 00016361
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HORNE, JESSICA <hr/> 6 Contributor address; City; State; Zip Code DENISON, TX 75020	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions)
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IMPERIAL, DONNA <hr/> Contributor address; City; State; Zip Code DALLAS, TX 75208	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JACKSON, LEIGHA <hr/> Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Paraprofessional		Employer (See Instructions)
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KESSNER, KELLY <hr/> Contributor address; City; State; Zip Code TOMBALL, TX 77375	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KIZER, ELYSE <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77006	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/12 Rpt: 10/18
2 FILER NAME ACT for Texas Classroom Teachers Association		3 Filer ID (Ethics Commission Filers) 00016361
4 Date 12/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KOELEMAY, PAM <hr/> 6 Contributor address; City; State; Zip Code LAKE JACKSON, TX 77566	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LOFTON STANLEY, SHA RHONDA <hr/> Contributor address; City; State; Zip Code CONVERSE, TX 78109	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MARTINEZ, ANGELA <hr/> Contributor address; City; State; Zip Code HOUSTON, TX 77079	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCCORMICK, PATRICIA <hr/> Contributor address; City; State; Zip Code ROUND ROCK, TX 78664	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MCHENRY, KARLEY <hr/> Contributor address; City; State; Zip Code LUFKIN, TX 75901	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/12 Rpt: 11/18
2 FILER NAME ACT for Texas Classroom Teachers Association		3 Filer ID (Ethics Commission Filers) 00016361
4 Date 12/04/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MEDINA, AMY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code MAGNOLIA, TX 77354		
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions)
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MILES, SHANNON	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code GRAND PRAIRIE, TX 75050		
Principal occupation / Job title (See Instructions) Paraprofessional		Employer (See Instructions)
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MORRIS, KATELYN	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code MCKINNEY, TX 75072		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) MOSLEY, DIANA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code DECATUR, TX 76235		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'MARY, BRANDEE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code POTTSBORO, TX 75076		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/12 Rpt: 12/18
2 FILER NAME ACT for Texas Classroom Teachers Association		3 Filer ID (Ethics Commission Filers) 00016361
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ORLANDO, TIFFANY <hr/> 6 Contributor address; City; State; Zip Code KATY, TX 77449	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAGE, KRISTINA <hr/> Contributor address; City; State; Zip Code GUN BARREL CITY, TX 75156	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PYLE, JOHN <hr/> Contributor address; City; State; Zip Code WHITEHOUSE, TX 75791	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RAY, DEBORAH <hr/> Contributor address; City; State; Zip Code TEMPLE, TX 76504	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RODRIGUEZ, VERONICA <hr/> Contributor address; City; State; Zip Code EDINBURG, TX 78541	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/12 Rpt: 13/18
2 FILER NAME ACT for Texas Classroom Teachers Association		3 Filer ID (Ethics Commission Filers) 00016361
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ROSS, HALEY	7 Amount of Contribution (\$) \$5.00
6 Contributor address; City; State; Zip Code WHITESBORO, TX 76273		
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions)
Date 12/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHIPLEY, CINTHYA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code NEW BRAUNFELS, TX 78130		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SHUKLA, BIJAL	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code BAYTOWN, TX 77523		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SLOSS, VERONICA	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code AMARILLO, TX 79109		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SMITH, PAULINE	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code THE COLONY, TX 75056		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/12 Rpt: 14/18
2 FILER NAME ACT for Texas Classroom Teachers Association		3 Filer ID (Ethics Commission Filers) 00016361
4 Date 12/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) THOMAS, MARSHA <hr/> 6 Contributor address; City; State; Zip Code AMARILLO, TX 79102	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) School Nurse		9 Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TRACY, APRIL <hr/> Contributor address; City; State; Zip Code SAN ANTONIO, TX 78247	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALKER, PAM <hr/> Contributor address; City; State; Zip Code CARTHAGE, TX 75633	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WALLACE, MARC <hr/> Contributor address; City; State; Zip Code PLAINVIEW, TX 79072	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WESTFALL-HAESSIG, MARSHA <hr/> Contributor address; City; State; Zip Code ARLINGTON, TX 76015	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/12 Rpt: 15/18
2 FILER NAME ACT for Texas Classroom Teachers Association		3 Filer ID (Ethics Commission Filers) 00016361
4 Date 12/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILLIAMS, TAMMY <hr/> 6 Contributor address; City; State; Zip Code FRIENDSWOOD, TX 77546	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions)
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WRIGHT, ERIN <hr/> Contributor address; City; State; Zip Code MINEOLA, TX 75773	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) YARBROUGH, LUKE <hr/> Contributor address; City; State; Zip Code TYLER, TX 75703	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions)

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 16/18

2 FILER NAME
ACT for Texas Classroom Teachers Association

3 Filer ID (Ethics Commission Filers)
00016361

4 TOTAL OF UNITEMIZED PLEDGES

\$ 60.00

5 Date

6 Full name of pledgor out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

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
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/2 Rpt: 17/18	2 FILER NAME ACT for Texas Classroom Teachers Association	3 Filer ID (Ethics Commission Filers) 00016361
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4 Date 12/10/2024	5 Payee name Diego Bernal Campaign
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6 Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 9862 Lorene Lane Suite 102 San Antonio, TX 78216
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/12/2024	Payee name James Talarico Campaign
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Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 15207 Austin, TX 78761
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Replacement Check for 3/1/2024 Campaign Contribution. Original was never received/deposited.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/12/2024	Payee name Josey Garcia For Texas House District 124
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Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 718 Amber Knoll San Antonio, TX 78251
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 2/2 Rpt: 18/18	2	FILER NAME ACT for Texas Classroom Teachers Association	3	Filer ID (Ethics Commission Filers) 00016361
4	Date 12/04/2024	5	Payee name Lois Kolkhorst Campaign		
6	Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7	Payee address; City; State; Zip Code PO Box 2546 Brenham, TX 77834		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 12/12/2024		Payee name Phil King Campaign		
	Amount (\$) \$1,500.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code PO Box 1913 Weatherford, TX 76086-9928		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 12/12/2024		Payee name Richard Pena Raymond Campaign		
	Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code P.O. Box 450349 Laredo, TX 78045		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Contribution		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			