#### 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) 00082579 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Voters PAC Date Received **ELECTRONICALLY FILED** 01/10/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 6923 Indiana Ave. Date Hand-delivered or Date Postmarked Box 292 Change of Address Lubbock, TX 79413 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Michael A. NAME NICKNAME LAST **SUFFIX** Stevens STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 6923 Indiana Ave. Box 292 STREET **ADDRESS** (Residence or Business) Lubbock, TX 79413 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 6923 Indiana Ave. Box 292 MAILING **ADDRESS** Lubbock, TX 79413 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (806) 790-0709 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** 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

12 COMMITTEE NAME			13 Filer ID (	Ethics Commission Filers)
Texas Voters PAC			00082579	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. John Burkholder city coun	cil midland	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported  B. Opposed		
	Officeholders     Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)  qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	2,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	2,250.00
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 TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			<b>'</b>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Michae	el A. Stevens	
		Signature of Ca	mpaign Treasurer	
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said	, ti	his the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of officer a	administering oath

### **SUBTOTALS - GPAC**

# FORM **GPAC** COVER SHEET PG 3

082579 \$	0.00 6 0.00
\$	2,000.00 6 0.00 6 0.00
4	2,000.00 6 0.00 6 0.00
4	0.00 6 0.00
4	0.00
\$	
	\$
0.0	
OR \$	\$
TION \$	5
\$	<b>3</b>
IIZATION \$	<b>3</b>
4	\$
\$	2,250.00
\$	0.00
\$	0.00
4	0.00
4	<b>S</b>
\$	
_	4 4 4

MONE	TARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
The Instr	uction Guide explains how to complete this	Total pages Schedule A1:     Sch: 1/1 Rpt: 4/6	
2 FILER NAM		3 Filer ID (Ethics Commission Filers) 00082579	
4 Date 11/01/2024			7 Amount of Contribution (\$) \$1,000.00
	Midland, TX 78701		
8 Principal occ engeneer	cupation / Job title (See Instructions)	9 Employer (See Instructions self employed	s)
Date 11/02/2024	Full name of contributor out-of-state PAC (ID#: Sparks, Don (Mr.) Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$1,000.00
	Midland, TX 79705		
Principal occ oil man	cupation / Job title (See Instructions)	s) company	

PLEI	DGED CONTRIBU	TIONS				SCHEDULE B		
The Instruction Guide explains how to complete this form.  2 FILER NAME				1	1 Total pages Schedule B: Sch: 1/1 Rpt: 5/6			
				3	Filer ID (Ethics Commission Filers)			
Texas Voters PAC			_	00082579				
4 TOTAL	TOTAL OF UNITEMIZED PLEDGES				\$	0.00		
<b>5</b> 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 Coo	le			` '' '		
					Check if travel outside of Te	exas. Complete Schedule T.		
<b>10</b> Principal	occupation / Job title (See Instru	uctions)	11 Employer (See In	structio	ns)			

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### 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

Contributions/ Donations Made By - Candidate/Officeholder/Political Committee		Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor			Travel in District  Travel Out of District  OTHER (enter a category not listed above)			
	Credit Card Payment		The Instruction Guide ex	xplains how to comp	lete this form.			
1	Total pages Schedule F1: Sch: 1/1 Rpt: 6/6	2 FILER NAME Texas Vote				3 Filer 000	ID 82579	(Ethics Commission Filers)
4	Date	5 Payee name						
	11/05/2024	Stevens, Mi	chael (Mr.)					
6	Amount (\$)	7 Payee addre	ss; City;	State; Zip Code				
	\$2,250.00	6923 indian						
		box 292						
	Expenditure from corporate funds	LUBBOCK,	TX 79413					
8	PURPOSE	(a) Category (Se	ee Categories listed at the top o	of this schedule) (b	<b>D</b> escription			
	OF EXPENDITURE	Advertising	Expense		Check if travel			elete Schedule T.
					Text messagi			
					rext messag	ing for c	icction (	day voics
9	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sough	<u> </u>		Office he	ld.
9	expenditure to benefit C/OF			city co9unc				ace 3 District city counci