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) 00085847 3 COMMITTEE NAME **OFFICE USE ONLY** Wilco 100 PAC Date Received **ELECTRONICALLY FILED** 01/15/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 953 Date Hand-delivered or Date Postmarked Change of Address Colleyville, TX 76034 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Frederick C. NAME NICKNAME LAST **SUFFIX** Tate STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 959 W Glade Rd. STREET **ADDRESS** (Residence or Business) Hurst, TX 76054 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** PO Box 953 MAILING **ADDRESS** Colleyville, TX 76034 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (469) 290-7500 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 Year 10 PERIOD 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 General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

Wilco 100 PAC 4 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 5. CONTRIBUTION TOTALS 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) check here if this report qualifies for the higher itemization threshold 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE TOTALS 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	085847	
ACTIVITY (Attach lists on plain paper to complete this report if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Opposed 4. Supported 5. Contribution Totals 1. Total unitemized political contributions (other than pledes, Loans, or Guarantees of Loans, or Contributions (other than pledes, Loans, or the higher itemization threshold 2. Total political contributions (other than pledes, Loans, or Guarantees of Loans) EXPENDITURE 3. Total unitemized political expenditures		
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(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	\$	0.00
	\$	0.00
4. TOTAL POLITICAL EXPENDITURES	\$	1,240.72
CONTRIBUTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	101.95
OUTSTANDING 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LOAN TOTALS LAST DAY OF THE REPORTING PERIOD	\$	0.00
AFFIDAVIT	<u> </u>	
I swear, or affirm, under penalty of perjury, to true and correct and includes all information under Title 15, Election Code.		
Mr. Frederick C		
Signature of Campaigr	n 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 Titl		

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

			3 of 5
17 COMMIT Wilco 1		18 Filer ID 00085847	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	\$	
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	\$	
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.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 1,240.72
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	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 F2: Sch: 1/2 Rpt: 4/5	2 FILER NAME Wilco 100 PAC		3 Filer ID (Ethics Commission Filers) 00085847				
4 TOTAL OF UNITEMIZ	ZED UNPAID INCURRED OBLIGA	TIONS	\$				
5 Date 10/29/2024	6 Payee name CFO Shield, LLC dba Red Elephan	nt Reports					
7 Amount (\$)	·	tate; Zip Code					
\$300.00	959 W. Glade Rd.						
Expenditure from corporate funds	Hurst, TX 76054						
9 TYPE OF EXPENDITURE	X Political	Non-Political					
10 PURPOSE OF	(a) Category (See Categories listed at the top of thi	_ · _ ·	outside of Texas. Complete Schedule T.				
EXPENDITURE	Accounting/Banking	Check if Austin	, TX, officeholder living expense				
		Campaign Bo	ookkeeping Services & Support				
11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH							
Date	Payee name	_					
11/01/2024	CFO Shield, LLC dba Red Elephan						
Amount (\$) \$470.36	Payee address; City; S 959 W. Glade Rd.	tate; Zip Code					
Expenditure from corporate funds	Hurst, TX 76054						
TYPE OF EXPENDITURE	X Political	Non-Political					
PURPOSE OF	(a) Category (See Categories listed at the top of thi	· · · · ·					
EXPENDITURE	Accounting/Banking		outside of Texas. Complete Schedule T. , TX, officeholder living expense				
		Campaign Bo	ookkeeping Services & Support				
Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name H	Office sought	Office held				

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/2 Rpt: 5/5 Wilco 100 PAC 00085847 \$ TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS 5 Date Payee name 12/01/2024 CFO Shield, LLC dba Red Elephant Reports Amount (\$) Payee address; City; State; Zip Code \$470.36 959 W. Glade Rd. Expenditure from Hurst, TX 76054 corporate funds TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign Bookkeeping Services & Support 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH