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) 00087735 3 COMMITTEE NAME **OFFICE USE ONLY** North Texas Democrats Date Received **ELECTRONICALLY FILED** 01/13/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1320 Rawlins St. Date Hand-delivered or Date Postmarked **Suite 1420** Change of Address Dallas, TX 75219 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Angela J. NAME NICKNAME LAST **SUFFIX** Owens STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1320 Rawlins St. STREET **ADDRESS** Suite 1420 (Residence or Business) Dallas, TX 75219 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1320 Rawlins St. MAILING **ADDRESS Suite 1420** Dallas, TX 75219 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (469) 625-4650 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** 07/01/2024 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

2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
North Texas Democra	ats		0008773	5
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.)			
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,090.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	6,879.46
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAS G PERIOD	ST DAY \$	1,116.12
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS O REPORTING PERIOD	FTHE \$	0.00
6 AFFIDAVIT	1		·	
		I swear, or affirm, under penalty of true and correct and includes all in under Title 15, Election Code.		
			la J. Owens	
		Signature of	Campaign Treas	surer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said		_, this the	day
		which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of of	ficer administering oath
3	V			3

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

					3 of 34
l		EE NAME as Democrats	18 Filer ID 00087735	(Ethics Commiss	ion Filers)
19 SCI	HEDULE	SUBTOTALS		SUBTOTAL	AMOUNT
NAI	ME OF S	SCHEDULE		SUBTUTAL	AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	7,090.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		\$			
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	
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.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	6,879.46
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
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	\$	
I					

	MONET	ARY POLITICAL C		SCHEDUL	E A1		
	The Instruc	ction Guide explains how t	to complete this for	n.	1	Total pages Schedule A1: Sch: 1/10 Rpt: 4/34	
2	FILER NAME North Texas	Democrats			3	Filer ID (Ethics Commission 00087735	n Filers)
4	Date 10/14/2024	5 Full name of contributor Cheng, Zhengang6 Contributor address; City; State	out-of-state PAC (ID#: te; Zip Code		7	Amount of Contribution (\$)	\$250.00
8	Principal occur	Raleigh, NC 27606 pation / Job title (See Instructions)	اه	Employer (See Instructions	·/		
0	Not Employe		9	Not Employed	·)		
	Date 07/21/2024	Full name of contributor Dixon, Paige Contributor address; City; Stat				Amount of Contribution (\$)	\$10.00
	Delicalization	Lewisville, TX 75067		Faralassa (Osa lastasstissa	<u></u>		
	Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		
	Date 08/21/2024	Full name of contributor Dixon, Paige Contributor address; City; Stat	out-of-state PAC (ID#:te; Zip Code)		Amount of Contribution (\$)	\$10.00
		Lewisville, TX 75067					
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions Not Employed	s)		
	Date 08/25/2024	Full name of contributor Duvvuri, Saawan Contributor address; City; Stat Nashville, TN 37215	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Student	pation / Job title (See Instructions)		Employer (See Instructions University School of Na:		ille	
	Date 08/10/2024	Full name of contributor Eppler, Sam Contributor address; City; Stat	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
	Principal occu Principal	pation / Job title (See Instructions)		Employer (See Instructions Dallas ISD	5)		
			,				

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUL	E A1		
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 2/10 Rpt: 5/34	
2	FILER NAME North Texas	Democrats			3	Filer ID (Ethics Commission 00087735	n Filers)
4	Date 10/02/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Dallas, TX 75230 pation / Job title (See Instructions)	la.	Employer (See Instructions	-, 		
0	Principal Principal	pation / Job title (See instructions)		Dallas ISD	·)		
	Date 07/18/2024	Full name of contributor out-of-state PAC (ID#Fischer, Martin Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
	Dringing age	Houston, TX 77030		Employer (See Instructions	<u></u>		
	Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	o)		
	Date 08/23/2024	Full name of contributor out-of-state PAC (ID# Garcia, Linda Contributor address; City; State; Zip Code	:)	•	Amount of Contribution (\$)	\$250.00
		Mesquite, TX 75149					
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions The Chosen Hundred	5)		
	Date 08/16/2024	Full name of contributor out-of-state PAC (ID# Garcia Hernandez, Cassandra Contributor address; City; State; Zip Code Dallas, TX 75248)		Amount of Contribution (\$)	\$100.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Hernandez Law	5)		
	Date 08/18/2024	Full name of contributor out-of-state PAC (ID# Gould, Kari Contributor address; City; State; Zip Code Carrollton, TX 75006)		Amount of Contribution (\$)	\$60.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Dallas county	5)		

	MONET	ARY POLITICAL CONTRIB	SCHEDULE A1				
	The Instruc	ction Guide explains how to complet	te this for	n.	1	Total pages Schedule A1: Sch: 3/10 Rpt: 6/34	
2	FILER NAME North Texas	Democrats			3	Filer ID (Ethics Commission 00087735	Filers)
4	Date 07/18/2024	 Full name of contributor out-of-state F Jimerson, Mickey Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$5.00
		San Jacinto, CA 92582					
8	Principal occu Teacher	pation / Job title (See Instructions)	9	Employer (See Instructions Dallas isd	s)		
	Date 08/18/2024	Full name of contributor out-of-state F Jimerson, Mickey Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5.00
	<u> </u>	San Jacinto, CA 92582		5 1 (0 1 1 1			
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Dallas isd	5)		
	Date 09/24/2024	Full name of contributor out-of-state F Jimerson, Mickey Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$5.00
		San Jacinto, CA 92582					
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Dallas isd	5)		
	Date 10/18/2024	Full name of contributor out-of-state F Jimerson, Mickey Contributor address; City; State; Zip Code San Jacinto, CA 92582)		Amount of Contribution (\$)	\$5.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Dallas isd	5)		
	Date 11/18/2024	Full name of contributor out-of-state F Jimerson, Mickey Contributor address; City; State; Zip Code San Jacinto, CA 92582)		Amount of Contribution (\$)	\$5.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Dallas isd	s)		
			•				

	MONET	ARY POLITICAL CO	S		SCHEDUI	E A1	
	The Instruc	ction Guide explains how t	o complete this form	n.	1	Total pages Schedule A1: Sch: 4/10 Rpt: 7/34	
2	FILER NAME North Texas	Democrats			3	Filer ID (Ethics Commission 00087735	on Filers)
4	Date 08/22/2024	5 Full name of contributor	out-of-state PAC (ID#:e; Zip Code		7	Amount of Contribution (\$)	\$250.00
_		Houston, TX 77002	1				
8	Principal occu Judge	pation / Job title (See Instructions)	9	Employer (See Instructions State of Texas	5)		
	Date 08/31/2024	Full name of contributor Jones, Darrell Contributor address; City; Stat Port Townsend, WA 98368				Amount of Contribution (\$)	\$20.00
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe			Not Employed	_		
	Date 10/05/2024	Full name of contributor [Kastl, Kristina N. Contributor address; City; Stat	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75204					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions KASTL LAW P.C.	5)		
	Date 10/07/2024	Full name of contributor Kralj, Nicholas Contributor address; City; Stat Austin, TX 78703				Amount of Contribution (\$)	\$100.00
	Principal occu Lobby	pation / Job title (See Instructions)		Employer (See Instructions Kralj Consulting Inc	5)		
	Date 09/17/2024	Full name of contributor Mellick, Calvin Contributor address; City; Stat Dallas, TX 75235	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$10.00
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Associate Fi	EIU DIIECUI		Dentsu Aegis Network			

	MONET	ARY POLITICAL CONTRIB		SCHEDUL	E A1		
	The Instruc	ction Guide explains how to complet	te this for	n.	1	Total pages Schedule A1: Sch: 5/10 Rpt: 8/34	
2	FILER NAME North Texas	Democrats			3	Filer ID (Ethics Commission 00087735	n Filers)
4	Date 08/20/2024	 Full name of contributor out-of-state F Menifee, VanDella Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Grand Prairie, TX 75052 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> ;)		
	Not Employe			Not Employed	,		
	Date Full name of contributor out-of-state PAC (ID#:) Nickens, Frederick Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
		Melissa, TX 75454					
	Principal occup Teacher	pation / Job title (See Instructions)		Employer (See Instructions PISD	s)		
	Date 07/22/2024	Full name of contributor out-of-state F Ognyanov, Martin Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$20.00
		Coppell, TX 75019					
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions Dallas ISD	5)		
	Date Full name of contributor out-of-state PAC (ID#:_ 08/22/2024 Ognyanov, Martin					Amount of Contribution (\$)	\$20.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Dallas ISD	<u>(</u>		
	Date 09/22/2024	Full name of contributor out-of-state F Ognyanov, Martin Contributor address; City; State; Zip Code Coppell, TX 75019				Amount of Contribution (\$)	\$20.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Dallas ISD	5)		

	MONEI	ONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to comple	ete this form	n.	1	Total pages Schedule A1: Sch: 6/10 Rpt: 9/34		
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)	
	North Texas					00087735		
4	Date 11/19/2024	Ognyanov, Martin	e PAC (ID#:)	7	Amount of Contribution (\$)	\$250.00	
_	Deinsinal	Coppell, TX 75019	lo.	Farely of (Con Instruction				
8	Teacher	pation / Job title (See Instructions)	9	Employer (See Instructions Dallas ISD				
	Date 08/29/2024	Plesa, Mihaela Contributor address; City; State; Zip Code	e PAC (ID#:			Amount of Contribution (\$)	\$100.00	
	Dringing con	Dallas, TX 75252		Employer (Coo Instructions	<u></u>			
	State Legisla	pation / Job title (See Instructions)		Employer (See Instructions Texas House of Repres		atives		
	Date		- DAC (ID#:	,	T	Amount of Contribution (\$)		
	07/24/2024	Potts, Garry Contributor address; City; State; Zip Code	e PAC (ID#:			Amount of Contribution (\$)	\$50.00	
		Dallas, TX 75209						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u></u>			
	Video produc	cer		Self				
	Date 08/28/2024	Full name of contributor out-of-state Rojas, Ileana Contributor address; City; State; Zip Code Farmers Branch, TX 75234	e PAC (ID#:)		Amount of Contribution (\$)	\$100.00	
	Principal occu Legal	pation / Job title (See Instructions)		Employer (See Instructions Ileana Garza-Rojas	5)			
	Date 08/09/2024	Full name of contributor out-of-state Scudder, Kendall Contributor address; City; State; Zip Code Dallas, TX 75214	e PAC (ID#:)		Amount of Contribution (\$)	\$250.00	
	Principal occu Business Ow	pation / Job title (See Instructions) vner		Employer (See Instructions Self	s)			

	MONET	ARY POLITICAL CO	S		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 7/10 Rpt: 10/34	
2	FILER NAME North Texas	Democrats			3	Filer ID (Ethics Commission 00087735	n Filers)
4	Date 10/01/2024	5 Full name of contributor Scudder, Kendall6 Contributor address; City; State	out-of-state PAC (ID#:; Zip Code		7	Amount of Contribution (\$)	\$250.00
8	Principal occu	Dallas, TX 75214 pation / Job title (See Instructions)	ام	Employer (See Instructions	·/		
0	Business Ow		3	Self	•)		
	Date 12/21/2024	Full name of contributor Sheaks, Robert Contributor address; City; State				Amount of Contribution (\$)	\$5.00
	D: : 1	Irving, TX 75060			<u></u>		
	Lab tech	pation / Job title (See Instructions)		Employer (See Instructions Electro Plate Circuitry	5)		
	Date 07/15/2024	Full name of contributor Simon, Yasmin Contributor address; City; State	out-of-state PAC (ID#:; Zip Code)		Amount of Contribution (\$)	\$10.00
		Dallas, TX 75205					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Morgan Lewis	s)		
	Date O8/15/2024 Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$10.00	
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Morgan Lewis	<u> </u> 5)		
	Date 08/16/2024	Full name of contributor Simon, Yasmin Contributor address; City; State Dallas, TX 75205	out-of-state PAC (ID#:; Zip Code)		Amount of Contribution (\$)	\$250.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Morgan Lewis	5)		
			'				

	MONET	ARY POLITICAL CO		SCHEDUL	E A1		
	The Instruc	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 8/10 Rpt: 11/34	
2	FILER NAME North Texas	Democrats			3	Filer ID (Ethics Commission 00087735	n Filers)
4	Date 09/15/2024	5 Full name of contributor Simon, Yasmin6 Contributor address; City; State;			7	Amount of Contribution (\$)	\$10.00
		Dallas, TX 75205	1				
8	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Morgan Lewis)		
	Date 09/23/2024	Full name of contributor Simon, Yasmin Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
	Deinsinal assu	Dallas, TX 75205		Frankriger (Cookington)			
	Attorney	pation / Job title (See Instructions)		Employer (See Instructions Morgan Lewis)		
	Date 09/26/2024	Full name of contributor Simon, Yasmin Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00
		Dallas, TX 75205					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Morgan Lewis)		
Date Full name of contributor out-of-state PAC (IE 09/29/2024 Simon, Yasmin		out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00	
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Morgan Lewis)		
	Date 08/16/2024	Full name of contributor Smith, Devyn Contributor address; City; State; Fort Worth, TX 76244	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$30.00
	Principal occu Workforce A	pation / Job title (See Instructions)		Employer (See Instructions Charles Schwab)		
		•	l				

	MONET	ARY POLITICAL (S		SCHEDUI	E A1		
	The Instruc	ction Guide explains hov	v to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 9/10 Rpt: 12/34	
2	FILER NAME North Texas	Democrats				3	Filer ID (Ethics Commission 00087735	on Filers)
4	Date 10/05/2024	5 Full name of contributor Solazzo, Alyssa6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10.00
		Freeport, NY 11520						
8	Principal occu Clerk Typist	pation / Job title (See Instructions 1	S) S	9	Employer (See Instructions Nassau Community Col		e	
	Date 07/18/2024	Full name of contributor Stuart, Cynthia Contributor address; City; S					Amount of Contribution (\$)	\$10.00
	Principal occu	Fort Worth, TX 76132 pation / Job title (See Instructions	5)		Employer (See Instructions	<u> </u> 5)		
	musician/tea	cher			self			
	Date 10/16/2024	Full name of contributor Sullivan, James Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75214						
	Principal occu Self-employe	pation / Job title (See Instructionsed	5)		Employer (See Instructions self	5)		
	Date 07/18/2024	Full name of contributor Taddiken, Mary Contributor address; City; S Lucas, TX 75002)		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)		Employer (See Instructions Not Employed	5)		
	Date 07/14/2024	Full name of contributor Taylor, Holly Contributor address; City; S Austin, TX 78751	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu Attorney	pation / Job title (See Instructions	5)		Employer (See Instructions Travis County DA	s)		
			<u>'</u>					

	MONET	ARY POLITICAL CO	S		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 10/10 Rpt: 13/34	
2	FILER NAME North Texas	Democrats			3	Filer ID (Ethics Commission 00087735	n Filers)
4	Date 09/29/2024	Taylor, Holly	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
_	<u> </u>	Austin, TX 78751	T _a				
8	Attorney	pation / Job title (See Instructions)		Employer (See Instructions Travis County DA's Office			
	Date 08/24/2024	Vogel, Jon Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$350.00
	Principal occu	Dallas, TX 75204 pation / Job title (See Instructions)		Employer (See Instructions	<u>.</u>		
	Not employe			Not employed	,		
	Date 10/02/2024	Full name of contributor Vogel, Jon Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
		Dallas, TX 75204					
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions Not employed	5)		
	Date 08/15/2024	Full name of contributor Weems, Christi e Contributor address; City; State; Houston, TX 77004	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instructions Harris County District Co		t	
	Date 10/05/2024	Full name of contributor Zeb, Sumbel Contributor address; City; State; Rockwall, TX 75032	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Director of de	pation / Job title (See Instructions) evelopment		Employer (See Instructions DBIA SW)		
			I				

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

Candidate/Officeholder/Politica Credit Card Payment	I 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: 1/21 Rpt: 14/34	North Texas Democrats 00087735
4 Date	5 Payee name
07/14/2024	Actblue
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$9.88	PO Box 4411146
Expenditure from corporate funds	Somerville, MA 02144
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
	Processing fees for donations.
	Trococcing roce for deflatione.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
07/21/2024	Actblue
Amount (\$)	Payee address; City; State; Zip Code
\$6.15	PO Box 4411146
Expenditure from	
corporate funds	Somerville, MA 02144
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 Processing fees for donations.
	Processing lees for donations.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
D-1-	
Date	Payee name
07/28/2024	Actblue
Amount (\$)	Payee address; City; State; Zip Code
\$2.77	PO Box 4411146
Expenditure from	
corporate funds	Somerville, MA 02144
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
	Processing fees for donations.
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 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

Candidate/Officeholder/Politica Credit Card Payment	I 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: 2/21 Rpt: 15/34	North Texas Democrats 00087735
4 Date	5 Payee name
08/11/2024	Actblue
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$19.76	PO Box 4411146
- "	
Expenditure from corporate funds	Somerville, MA 02144
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 Processing fees for donations.
	Processing lees for donations.
9 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
08/18/2024	Actblue
Amount (\$)	Payee address; City; State; Zip Code
\$27.87	PO Box 4411146
Expenditure from corporate funds	Somerville, MA 02144
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Processing fees for donations.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
08/25/2024	Actblue
Amount (\$)	Payee address; City; State; Zip Code
\$44.66	PO Box 4411146
Expenditure from corporate funds	Somerville, MA 02144
PURPOSE	las -
OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Processing fees for donations.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure 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

Candidate/Officeholder/Politica Credit Card Payment	I 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: 3/21 Rpt: 16/34	North Texas Democrats 00087735
4 Date	5 Payee name
09/01/2024	Actblue
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$8.69	PO Box 4411146
Expenditure from corporate funds	Somerville, MA 02144
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 Processing fees for donations.
	1 Todassing Tees for donations.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
5.	
Date	Payee name
09/15/2024	Actblue
Amount (\$)	Payee address; City; State; Zip Code
\$0.40	PO Box 4411146
Expenditure from corporate funds	Somerville, MA 02144
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 Processing fees for donations.
	Processing lees for donations.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
09/22/2024	Actblue
Amount (\$)	Payee address; City; State; Zip Code
\$1.19	PO Box 4411146
- Formanditure Cons	
Expenditure from corporate funds	Somerville, MA 02144
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
	Processing fees for donations.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure 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

Candidate/Officeholder/Politica Credit Card Payment		Contract Labor OTHER (enter a category not listed above)
•	The Instruction Guide explains how to complete	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/21 Rpt: 17/34	North Texas Democrats	00087735
4 Date	5 Payee name	•
09/29/2024	Actblue	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$27.86	PO Box 4411146	
Expenditure from corporate funds	Somerville, MA 02144	
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 Processing fees for donations.
	'	Tocessing ices for donations.
O Complete ONLY if direct	Condidate/Officeholder name Office sought	Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office field
Date	Payee name	
10/06/2024	Actblue	
Amount (\$)	Payee address; City; State; Zip Code	
\$67.56	PO Box 4411146	
— Consorditure from		
Expenditure from corporate funds	Somerville, MA 02144	
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
	F	Processing fees for donations.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
experientare to benefit 6/61	<u>'</u>	
Date	Payee name	
10/13/2024	Actblue	
Amount (\$)	Payee address; City; State; Zip Code	
\$3.95	PO Box 4411146	
Expenditure from corporate funds	Somerville, MA 02144	
PURPOSE		Description
OF	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Processing fees for donations.
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/OI	7	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

ng Expense Travies/Wages/Contract Labor OTH

			OTTIER (enter a	category not listed above)
2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
North Texas Democrats			00087735	
5 Payee name		·		
Actblue				
7 Payee address; City; State; Zip Co	de			
PO Box 4411146				
Somerville, MA 02144				
(a) Category (See Categories listed at the top of this schedule)	(b) De			
Fees	H	1		
	⊢ Pr	1		
		•		
	ght		Office he	eld
H				
Payee name				
Actblue				
Payee address; City; State; Zip Co	de			
PO Box 4411146				
Somerville, MA 02144				
(a) Category (See Categories listed at the top of this schedule)	(b) De	escription		
Fees		1		
	L Pr	1		
		9		
Candidate/Officeholder name Office sou	ght		Office he	eld
H				
Payee name				
Apple				
Payee address; City; State; Zip Co	de			
3101 Knox St				
Dallas, TX 75205				
(a) Category (See Categories listed at the top of this schedule)	(b) De	_		
Office Overhead/Rental Expense		1		•
	∟ Of	1	omocnoidei iiviilig	, expense
	ght		Office he	eld
Н				
	The Instruction Guide explains how to co 2 FILER NAME North Texas Democrats 5 Payee name Actblue 7 Payee address; City; State; Zip Co PO Box 4411146 Somerville, MA 02144 (a) Category (see Categories listed at the top of this schedule) Fees Candidate/Officeholder name Actblue Payee name Actblue Payee address; City; State; Zip Co PO Box 4411146 Somerville, MA 02144 (a) Category (see Categories listed at the top of this schedule) Fees Candidate/Officeholder name Office sou H Payee name Apple Payee address; City; State; Zip Co 3101 Knox St Dallas, TX 75205 (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense	The Instruction Guide explains how to complete 2 FILER NAME North Texas Democrats 5 Payee name Actblue 7 Payee address; City; State; Zip Code PO Box 4411146 Somerville, MA 02144 (a) Category (See Categories listed at the top of this schedule) Fees Candidate/Officeholder name Actblue Payee address; City; State; Zip Code PO Box 4411146 Somerville, MA 02144 (a) Category (See Categories listed at the top of this schedule) Fees Candidate/Officeholder name Apple Payee name Apple Payee name Apple Payee address; City; State; Zip Code Somerville, MA 02144 (a) Category (See Categories listed at the top of this schedule) Payee name Apple Payee address; City; State; Zip Code 3101 Knox St Dallas, TX 75205 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Office sought	The Instruction Guide explains how to complete this form. 2 FILER NAME North Texas Democrats 5 Payee name Actblue 7 Payee address; City; State; Zip Code PO Box 4411146 Somerville, MA 02144 (a) Category (see Categories listed at the top of this schedule) Fees Candidate/Officeholder name Office sought Payee name Actblue Payee address; City; State; Zip Code PO Box 4411146 Somerville, MA 02144 (a) Category (see Categories listed at the top of this schedule) Fees (b) Description Check if Austin, TX, Processing fees (b) Description Check if vavel outsic Check if Austin, TX, Processing fees Candidate/Officeholder name Office sought Payee name Apple Payee name Apple Payee address; City; State; Zip Code Office sought Candidate/Officeholder name Office sought (b) Description Check if vavel outsic Check if Austin, TX, Processing fees Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought	The Instruction Guide explains how to complete this form. 2 FILER NAME North Texas Democrats 5 Payee name Actiblue 7 Payee address; City; State; Zip Code PO Box 4411146 Somerville, MA 02144 (a) Category (see Categories listed at the top of this schedule) Fees Candidate/Officeholder name Office sought Office he Payee name Actiblue Payee address; City; State; Zip Code PO Box 4411146 Somerville, MA 02144 (a) Category (see Categories listed at the top of this schedule) Payee name Actiblue Payee address; City; State; Zip Code PO Box 4411146 Somerville, MA 02144 (a) Category (see Categories listed at the top of this schedule) Fees Candidate/Officeholder name Office sought Office sought Office he Payee name Apple Payee name Apple Payee address; City; State; Zip Code 3101 Knox St Dallas, TX 75205 (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense Candidate/Officeholder name Office sought Office sought Office supplies Candidate/Officeholder name Office sought Office supplies

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 co	mplet	e this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 F	iler ID	(Ethics Commission Filers)
Sch: 6/21 Rpt: 19/34	North Texas Democrats		C	00087735	
4 Date	5 Payee name		•		
12/24/2024	Apple				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$74.69	3101 Knox St				
Expenditure from					
corporate funds	Dallas, TX 75205				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	 Description		
OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside		
		l l	Check if Austin, TX, of Office supplies	fficeholder living	expense
		·	Office supplies		
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht		Office he	ald.
expenditure to benefit C/OI		agrit		Office fie	au .
Data					
Date 12/31/2024	Payee name				
	Bangkok City Restaurant				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$58.00	4301 Bryan St				
Expenditure from	#101				
corporate funds	Dallas, TX 75204				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
EXPENDITURE	Food/Beverage Expense		Check if travel outside		
			ப Meeting with unio		
Complete ONLY if direct	Candidate/Officeholder name Office sou	ught		Office he	eld
expenditure to benefit C/OI	4				
Date	Payee name				
10/21/2024	Bangkok at Beltline				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$48.58	100 Central Expy #108				
Expenditure from corporate funds	Richardson, TX 75080				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description		
OF	Event Expense	[,,	Check if travel outside	of Texas. Com	plete Schedule T.
EXPENDITURE		İ	Check if Austin, TX, or	fficeholder living	expense
			Food for event		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ught		Office he	eld
2p 22					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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 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 th	nis form.
1 Total pages Schedule F1: Sch: 7/21 Rpt: 20/34	2 FILER NAME North Texas Democrats	3 Filer ID (Ethics Commission Filers) 00087735
4 Date 09/03/2024	5 Payee name Bank of America	I .
6 Amount (\$) \$16.00	7 Payee address; City; State; Zip Code 100 N Tryon St	
Expenditure from corporate funds	Charlotte, NC 28255	
8 PURPOSE OF EXPENDITURE	🛅	scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense nk service charge
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought H	Office held
Date 12/02/2024	Payee name Bank of America	
Amount (\$) \$16.00	Payee address; City; State; Zip Code 100 N Tryon St	
Expenditure from corporate funds	Charlotte, NC 28255	
PURPOSE OF EXPENDITURE	Accounting/Banking	scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense nk service charge
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought H	Office held
Date 08/30/2024	Payee name Domino's	
Amount (\$) \$65.00	Payee address; City; State; Zip Code 4880 Sunnyvale St #2714	
corporate funds	Dallas, TX 75216	
PURPOSE OF EXPENDITURE		scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense od for event
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee I	Legal Services The Instruction Guide (Salaries/V	Wages	/Contract Labor		OTHER (enter a	category not listed above)
1 Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
Sch: 8/21 Rpt: 21/34	North Texas	Democrats					00087735	,
4 Date	5 Payee name							
10/21/2024	Domino's							
6 Amount (\$)	7 Payee addres	s; City;	State; Zip Co	ode				
\$133.40	4880 Sunny	⁄ale St						
	#2714							
Expenditure from corporate funds	Dallas, TX 7	5216						
8 PURPOSE	(a) Category (See	e Categories listed at the top	of this schedule)	(b)	Description			
OF EXPENDITURE	Event Exper						de of Texas. Com	
EXI ENDITORE					_		officeholder living	expense
					Food for ever	nt		
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Offic	eholder name	Office sou	ıght			Office he	eld
Date	Payee name							
12/23/2024	El Fenix							
Amount (\$)	Payee addres	s; City;	State; Zip Co	ode				
\$100.15	6811 W Nort	hwest Hwv	·					
, , , ,	Unit 5	,						
Expenditure from		F22F						
corporate funds	Dallas, TX 7	5225						
PURPOSE OF	(a) Category (See	e Categories listed at the top	of this schedule)	(b)	Description			
EXPENDITURE	Food/Bevera	ige Expense			=		de of Texas. Comp officeholder living	
					Budget meeti		, officerolaer living	expense
					Buuget meeti	ny		
Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ıaht			Office he	eld
expenditure to benefit C/OI		enoider name	011100 000	agi it			Omoc ne	
Date	Payee name							
10/15/2024	Extra Space							
Amount (\$)	Payee addres	s; City;	State; Zip Co	odo				
	1751 E Belt	•	State, Zip Ct	Jue				
\$122.64	1751 E Beit	Lille Ru						
Expenditure from corporate funds	Coppell, TX	75019						
PURPOSE		e Categories listed at the top	of this police to the	(h)	Description			
OF		e categories listed at the top lead/Rental Expens		(~)		outsi	de of Texas. Com	plete Schedule T.
EXPENDITURE	Onice Overn	edd/rteritai Experie			Check if Austin,	, TX,	officeholder living	expense
					Storage Rent	al		
Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ıght			Office he	eld
expenditure to benefit C/OI	4							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	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: 9/21 Rpt: 22/34	North Texas Democrats 00087735
4 Date	5 Payee name
11/14/2024	Extra Space
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$69.12	1751 E Belt Line Rd
Expenditure from corporate funds	Coppell, TX 75019
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Storage rental
	Storage rental
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/16/2024	Extra Space
Amount (\$)	Payee address; City; State; Zip Code
\$57.00	1751 E Belt Line Rd
— Formanditure from	
Expenditure from corporate funds	Coppell, TX 75019
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Storage Rental
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/61	
Date	Payee name
11/04/2024	GoDaddy
Amount (\$)	Payee address; City; State; Zip Code
\$2.67	2150 E Warner Rd
_	
Expenditure from corporate funds	Tempe, AZ 85284
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Email 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 Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Political C Credit Card Payment		ies/Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1: 2	P. FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 10/21 Rpt: 23/34	North Texas Democrats	00087735
4 Date 5	Payee name	
12/02/2024	GoDaddy	
6 Amount (\$) 7	' Payee address; City; State; Zip	Code
\$2.67	2150 E Warner Rd	
Evpanditure from		
Expenditure from corporate funds	Tempe, AZ 85284	
8 PURPOSE (a	a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Email service
		Email Service
9 Complete ONLY if direct	Candidate/Officeholder name Office	Sought Office held
expenditure to benefit C/OH	Candidate/Officeriolider Harrie Office	Sought Office Held
Data T		
Date	Payee name	
12/30/2024	GoDaddy	
Amount (\$)	Payee address; City; State; Zip	Code
\$2.67	2150 E Warner Rd	
Expenditure from		
corporate funds	Tempe, AZ 85284	
PURPOSE (a	a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Software
Complete ONLY if direct	Condidate/Officeholder name Office	Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office	sought Office held
Date	Payee name	
10/18/2024	Griffin, Hunter	
Amount (\$)	Payee address; City; State; Zip	Code
\$40.00	814 South Main St	
Expenditure from		
corporate funds	Grapevine, TX 76051	
PURPOSE (a	a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Event assistance
Complete ONLY & direct	Condidate/Officehalder resure	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office	sought Office held
·		

SCHEDULE F1

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

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

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 co	mplete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 11/21 Rpt: 24/34	North Texas Democrats	00087735
4 Date 10/21/2024	5 Payee name Griffin, Hunter	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$250.00	814 South Main St	
Expenditure from corporate funds	Grapevine, TX 76051	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event assistance and reimbursements for event supplies
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office soug	ght Office held
Date	Payee name	
10/10/2024	Home Depot	
Amount (\$)	Payee address; City; State; Zip Co	de
\$300.00	18855 Lyndon B Johnson Frwy	
Expenditure from corporate funds	Mesquite, TX 75150	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event supplies
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office soud	ght Office held
Date	Payee name	
10/15/2024	Home Depot	
Amount (\$) \$21.18	Payee address; City; State; Zip Co. 18855 Lyndon B Johnson Frwy	de
Expenditure from corporate funds	Mesquite, TX 75150	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event Supplies
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office soud	ght Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Cor Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 12/21 Rpt: 25/34	North Texas Democrats 00087735
4 Date	5 Payee name
10/11/2024	Joann Stores
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$115.12	700 Alma Dr
Expenditure from	
corporate funds	Plano, TX 75075
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense
	Check if Austin, TX, officeholder living expense
	Event decorations and supplies
O Commission ONLY if dispose	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
12/02/2024	Ledbetter Eagle Ford Community Food Pantry
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	5227 Nomas St
Expenditure from corporate funds	Dallas, TX 75212
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Donation to food bank for Christmas food drive
Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/23/2024	Ledbetter Eagle Ford Community Food Pantry
Amount (\$)	Payee address; City; State; Zip Code
\$100.00	5227 Nomas St
Expenditure from	
corporate funds	Dallas, TX 75212
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Contribution for Christmas Drive
Occupation Children	On didn't 10 ff a balden name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

Candidate/Officeholder/Politica Credit Card Payment	Il 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: 13/21 Rpt: 26/34	North Texas Democrats 00087735	
4 Date	5 Payee name	
07/31/2024	Mendez, Misael	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1,000.00	10343 Whitingham Dr	
Expenditure from corporate funds	Dallas, TX 75227	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Canvassing	
	Carryassing	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Payee name	
08/30/2024	Oak Cliff Print	
Amount (\$)	Payee address; City; State; Zip Code	
\$59.54	734 Jefferson Blvd	
— Formanditure from		
Expenditure from corporate funds	Dallas, TX 75208	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Printing Expense	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Printing	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experientare to benefit Great		
Date	Payee name	
08/29/2024	Office Max/Depot	
Amount (\$)	Payee address; City; State; Zip Code	
\$75.84	7777 N MacArthur Blvd	
Expenditure from corporate funds	Irving, TX 75063	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	
EXPENDITORE	Check if Austin, TX, officeholder living expense	
	Office Supplies	
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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Food/Beverage 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: 14/21 Rpt: 27/34	North Texas Democrats 00087735	
4 Date	5 Payee name	
10/21/2024	Office Max/Depot	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$1.90	7777 N MacArthur Blvd	
— Foresteller of forest		
Expenditure from corporate funds	Irving, TX 75063	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Office supplies	
	Office Supplies	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Date	Payee name	
11/01/2024	Ognyanov, Martin	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	770 Fairway Dr	
42,000.00	Apt 2628	
Expenditure from	·	
corporate funds	Coppell, TX 75019	
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	
	Officer salary	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	1	
Date	Payee name	
09/09/2024	Owens Financial Services	
Amount (\$)	Payee address; City; State; Zip Code	
\$100.00	3710 Rawlins St	
	#1420	
Expenditure from corporate funds	Dallas, TX 75219	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Bookkeeping/TEC filing	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
ONPORTATION OF DETERMINE OF OTT		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

kpense 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

eimbursement Solicitation/Fundraising Expense
ntal Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officenoider/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: 15/21 Rpt: 28/34	North Texas Democrats 00087735
4 Date	5 Payee name
12/20/2024	Owens Financial Services
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$250.00	3710 Rawlins St
- "	#1420
Expenditure from corporate funds	Dallas, TX 75219
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Bookkeeping
	g
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/15/2024	Party City
Amount (\$)	Payee address; City; State; Zip Code
\$90.90	2540 N Josey Ln
Ψ30.30	Ste 126
Expenditure from	
corporate funds	Carrollton, TX 75006
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxes, Complete Schedule T
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Event decorations and supplies
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
10/15/2024	Party City
Amount (\$)	Payee address; City; State; Zip Code
\$10.81	2540 N Josey Ln
	Ste 126
Expenditure from corporate funds	Carrollton, TX 75006
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Event decorations and supplies.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<u> </u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Ivertising 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

Candidate/Officeholder/Politica Credit Card Payment	Il 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: 16/21 Rpt: 29/34	North Texas Democrats 00087735	
4 Date	5 Payee name	
10/17/2024	Party City	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$31.91	2540 N Josey Ln	
	Ste 126	
Expenditure from corporate funds	Carrollton, TX 75006	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense Event decorations and supplies	
	Event decordaons and supplies	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/Ol	- · · · · · · · · · · · · · · · · · · ·	
Date	Payee name	
12/09/2024	Redistricter	
Amount (\$)	Payee address; City; State; Zip Code	
\$35.00	5900 Balcones Dr	
400.00	Ste 4000	
Expenditure from		
corporate funds	Austin, TX 78731	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Software	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Date	Payee name	
10/21/2024	Starbucks	
Amount (\$)		
\$29.58	Payee address; City; State; Zip Code 5955 Custer Rd	
\$29.58	5955 Custer Ru	
Expenditure from		
corporate funds	Frisco, TX 75035	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense For volunteers helping with event	
	1 of volunteers freight with event	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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 c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 17/21 Rpt: 30/34	North Texas Democrats	00087735
4 Date	5 Payee name	<u>'</u>
09/30/2024	Staycation Coffee	
6 Amount (\$)	7 Payee address; City; State; Zip C	rode
\$300.00	201 S Texas St	
Expenditure from corporate funds	Richardson, TX 75081	
8 PURPOSE		(b) Description
OF	(a) Category (See Categories listed at the top of this schedule) Event Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Venue rent
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught Office held
experioritire to benefit C/O		
Date	Payee name	
10/08/2024	Staycation Coffee	
Amount (\$)	Payee address; City; State; Zip C	ode
\$300.00	201 S Texas St	
Expenditure from corporate funds	Richardson, TX 75081	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Event Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Venue Rental
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught Office held
experientare to benefit 6/61		
Date	Payee name	
11/27/2024	Switchboard PBC	
Amount (\$)	Payee address; City; State; Zip C	ode
\$60.24	1752 P St NW	
F		
Expenditure from corporate funds	Washington, DC 20036	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Texting service
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught Office held
3.,50	··	

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officenoider/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: 18/21 Rpt: 31/34	North Texas Democrats 00087735		
4 Date	5 Payee name		
12/04/2024	Switchboard PBC		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$246.19	1752 P St NW		
Expenditure from corporate funds	Washington, DC 20036		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description		
EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Texting service		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/O			
Date	Payee name		
10/09/2024	Target		
Amount (\$)	Payee address; City; State; Zip Code		
\$91.89	7845 N MacArthur Blvd		
Ψ31.03	7043 N MacAithai Biva		
Expenditure from corporate funds	Irving, TX 75063		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.		
	Check if Austin, TX, officeholder living expense Event decorations and supplies		
	Event decorations and supplies		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/OH			
Date	Davies water		
10/18/2024	Payee name Target		
	-		
Amount (\$)	Payee address; City; State; Zip Code		
\$74.35	7845 N MacArthur Blvd		
Expenditure from corporate funds	Irving, TX 75063		
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.		
EXPENDITURE	Check if Austin, TX, officeholder living expense		
	Event supplies		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
experience to benefit 5, 5.			

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
OTHER (pottor a category not listed above)

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District 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: 19/21 Rpt: 32/34 North Texas Democrats 00087735 4 Date Payee name 10/15/2024 Thomas, Terrance 6 Amount (\$) Payee address; State; Zip Code \$100.00 530 Buckingham Rd Expenditure from Richardson, TX 75081 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. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense DJ and MC at event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/17/2024 Thomas, Terrance Amount (\$) Payee address; City; State; Zip Code \$150.00 530 Buckingham Rd Expenditure from Richardson, TX 75081 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. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense DJ and MC at event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/03/2024 Tom Thumb Amount (\$) Payee address: City: State; Zip Code \$49.03 2727 Live Oak St Expenditure from corporate funds Dallas, TX 75204 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Food for event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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 Salaries/Wages/Contract Labor

t 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: 20/21 Rpt: 33/34	North Texas Democrats			00087735	
4 Date	5 Payee name		<u> </u>		
10/21/2024	Tom Thumb				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$189.46	2727 Live Oak St				
Expenditure from corporate funds	Dallas, TX 75204	_			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Des	cription		
OF EXPENDITURE	Event Expense		Check if travel outsid Check if Austin, TX, o		
			od and event s		j expense
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ıaht		Office he	eld .
expenditure to benefit C/O		.9		000	
Date	Payee name				
10/18/2024	Wix				
		nd o			
Amount (\$) \$46.54	Payee address; City; State; Zip Co	oue			
\$40.54	7095 Hollywood Blvd				
Expenditure from corporate funds	Los Angeles, CA 90028				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Des	cription		
OF EXPENDITURE	Advertising Expense	_ =	Check if travel outsid		
			Check if Austin, TX, o bsite	onicenoider living) expense
		'''			
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ıght		Office he	eld
expenditure to benefit C/O		J			
Date	Payee name				
11/19/2024	Wix				
		ndo.			
Amount (\$) \$46.54	Payee address; City; State; Zip Co 7095 Hollywood Blvd	de			
Ψ40.54	7099 Hollywood Blvd				
Expenditure from corporate funds	Los Angeles, CA 90028				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Des			
OF EXPENDITURE	Advertising Expense		Check if travel outsid		•
-			Check if Austin, TX, o bsite	officeholder living	g expense
		"	DOILO		
Complete ONLY if direct	Candidate/Officeholder name Office sou	l Inht		Office he	ald
expenditure to benefit C/O		ıgııı		Office He	Jiu

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 B Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Sy-Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 21/21 Rpt: 34/34		00087735
4 Date	5 Payee name	
12/19/2024	Wix	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$46.54		
φ40.54	7093 Hollywood Biva	
Expenditure from corporate funds	Los Angeles, CA 90028	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	7 to 10 to 1	el outside of Texas. Complete Schedule T.
	Website	in, TX, officeholder living expense
	vebsite	
O Commission ONLL V if divers	Condidate/Officeholder name	Office heald
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought OH	Office held