

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

| | | | |
|---|--|---|--|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00017327 | 2 Total pages filed: 10 |
| 3 COMMITTEE NAME Teamsters Local #745 Drive | | OFFICE USE ONLY | |
| | | Date Received ELECTRONICALLY FILED 01/13/2025 | |
| | | Date Hand-delivered or Date Postmarked | |
| | | Receipt # | Amount |
| | | Date Processed | |
| | | Date Imaged | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1007 Jonelle St Dallas, TX 75217 | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR | FIRST | MI |
| | Mr. | Brent | |
| | NICKNAME | LAST | SUFFIX |
| | | Taylor | |
| 6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small> | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1007 Jonelle St. Dallas, TX 75217 | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1007 Jonelle Street Dallas, TX 75217 | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER | EXTENSION |
| | (214) | 398-0661 | |
| 9 REPORT TYPE | <input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff | | |
| 10 PERIOD COVERED | Month Day Year | THROUGH | Month Day Year |
| | 10/27/2024 | | 12/31/2024 |
| 11 ELECTION | ELECTION DATE Month Day Year | ELECTION TYPE | |
| | | <input type="checkbox"/> Primary | <input type="checkbox"/> Runoff <input type="checkbox"/> Other |
| | | <input type="checkbox"/> General | <input type="checkbox"/> Special |

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

| | |
|--|---|
| 12 COMMITTEE NAME Teamsters Local #745 Drive | 13 Filer ID (Ethics Commission Filers) 00017327 |
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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 Keven MCCaffrey Presiding Officer Suffolk County Legislator |
| | | 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 | \$ | 20.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 20.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 21,996.11 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 332,767.55 |
| 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.

Mr. Brent Taylor

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

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

| | |
|--|---|
| 12 COMMITTEE NAME Teamsters Local #745 Drive | 13 Filer ID (Ethics Commission Filers) 00017327 |
|--|---|

| | | |
|---|--|---|
| 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 Dan Patrick Republican Lt. Governor of Texas |
| | | 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.) | |
| | | |

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|--|--|---|
| 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 Jessica Gonzalez Democrat State Representative |
| | | 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.) | |
| | | |

SUBTOTALS - GPAC

| | | |
|--|--|---|
| 17 COMMITTEE NAME Teamsters Local #745 Drive | | 18 Filer ID (Ethics Commission Filers) 00017327 |
| 19 SCHEDULE SUBTOTALS | | SUBTOTAL AMOUNT |
| | NAME OF SCHEDULE | |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 20.00 |
| 2. | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 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 | \$ 21,996.11 |
| 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 checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 4,802.81 |

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: 1/3 Rpt: 5/10 | 2 FILER NAME Teamsters Local #745 Drive | 3 Filer ID (Ethics Commission Filers) 00017327 |
|---|---|--|

| | |
|-----------------------------|---|
| 4 Date 11/08/2024 | 5 Payee name Friends of Keven McCaffrey |
|-----------------------------|---|

| | |
|---|--|
| 6 Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code P.O. Box 27 Lindenberg, TX 11757 |
|---|--|

| | | |
|---------------------------------|---|---|
| 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 Contribution for 2024 Fall Festival |
|---------------------------------|---|---|

| | | | |
|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

| | |
|--------------------|---------------------------------|
| Date 12/10/2024 | Payee name Gonzalez, Jessica |
|--------------------|---------------------------------|

| | |
|--|--|
| Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 501 E 8th Street Dallas, TX 75203 |
|--|--|

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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 Fund contribution |
|-------------------------------|---|--|

| | | | |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|--|
| Date 10/27/2024 | Payee name Internal Revenue Service |
|--------------------|--|

| | |
|---|--|
| Amount (\$) \$19.69 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code P.O. Box 409101 Ogden, UT 84409 |
|---|--|

| | | |
|-------------------------------|--|--|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Tax expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tax for 1120-POL |
|-------------------------------|--|--|

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|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

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: 2/3 Rpt: 6/10 | 2 FILER NAME Teamsters Local #745 Drive | 3 Filer ID (Ethics Commission Filers) 00017327 |
|---|---|--|

| | |
|-----------------------------|---------------------------------------|
| 4 Date 10/29/2024 | 5 Payee name Moore, Gregory |
|-----------------------------|---------------------------------------|

| | |
|---|---|
| 6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 6928 Club Creek Dr Fort Worth, TX 76137 |
|---|---|

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|---------------------------------|--|---|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stipend |
|---------------------------------|--|---|

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|---|-----------------------------|---------------|-------------|
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|---|-----------------------------|---------------|-------------|

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|--------------------|------------------------------|
| Date 12/17/2024 | Payee name Moore, Gregory |
|--------------------|------------------------------|

| | |
|--|--|
| Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 6928 Club Creek Dr Fort Worth, TX 76137 |
|--|--|

| | | |
|------------------------|--|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stipend |
|------------------------|--|---|

| | | | |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought | Office held |
|--|-----------------------------|---------------|-------------|

| | |
|--------------------|----------------------------|
| Date 11/12/2024 | Payee name Ramos, Alice |
|--------------------|----------------------------|

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|--|--|
| Amount (\$) \$5,726.42 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 24260 Martha St. Woodland Hills, CA 91367 |
|--|--|

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|------------------------|---|---|
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Accounting/Banking | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting fees |
|------------------------|---|---|

| | | | |
|--|-----------------------------|---------------|-------------|
| Complete <u>ONLY</u> 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: 3/3 Rpt: 7/10 | 2 FILER NAME Teamsters Local #745 Drive | 3 Filer ID (Ethics Commission Filers) 00017327 |
| 4 Date 12/10/2024 | 5 Payee name The Honorable Dan Patrick | |
| 6 Amount (\$) \$12,500.00 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code PO Box 685085 Austin, TX 78768 | |
| 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 |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 1/3 Rpt: 8/10 |
| 2 FILER NAME Teamsters Local #745 Drive | | 3 Filer ID (Ethics Commission Filers) 00017327 |
| 4 Date 10/31/2024 | 5 Name of person from whom amount is received Cetera | 8 Amount (\$) \$0.06 |
| 6 Address of person from whom amount is received; City; State; Zip Code Los Angeles, CA 90010 | | |
| 7 Purpose for which amount is received Interest | | |
| <input type="checkbox"/> Check if political contribution returned to filer | | |
| 4 Date 11/18/2024 | 5 Name of person from whom amount is received Cetera | 8 Amount (\$) \$0.06 |
| 6 Address of person from whom amount is received; City; State; Zip Code Los Angeles, CA 90010 | | |
| 7 Purpose for which amount is received Interest | | |
| <input type="checkbox"/> Check if political contribution returned to filer | | |
| 4 Date 12/16/2024 | 5 Name of person from whom amount is received Cetera | 8 Amount (\$) \$0.04 |
| 6 Address of person from whom amount is received; City; State; Zip Code Los Angeles, CA 90010 | | |
| 7 Purpose for which amount is received Interest | | |
| <input type="checkbox"/> Check if political contribution returned to filer | | |
| 4 Date 10/31/2024 | 5 Name of person from whom amount is received Cetera | 8 Amount (\$) \$412.95 |
| 6 Address of person from whom amount is received; City; State; Zip Code Los Angeles, CA 90010 | | |
| 7 Purpose for which amount is received Interest | | |
| <input type="checkbox"/> Check if political contribution returned to filer | | |
| 4 Date 11/01/2024 | 5 Name of person from whom amount is received Cetera | 8 Amount (\$) \$446.07 |
| 6 Address of person from whom amount is received; City; State; Zip Code Los Angeles, CA 90010 | | |
| 7 Purpose for which amount is received Interest | | |
| <input type="checkbox"/> Check if political contribution returned to filer | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 2/3 Rpt: 9/10 |
| 2 FILER NAME Teamsters Local #745 Drive | | 3 Filer ID (Ethics Commission Filers) 00017327 |
| 4 Date 12/02/2024 | 5 Name of person from whom amount is received Cetera | 8 Amount (\$) \$442.24 |
| | 6 Address of person from whom amount is received; City; State; Zip Code Los Angeles, CA 90010 | |
| | 7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Interest | |
| Date 10/31/2024 | Name of person from whom amount is received Equitable Advisors | Amount (\$) \$0.61 |
| | Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75251 | |
| | Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Interest | |
| Date 11/29/2024 | Name of person from whom amount is received Equitable Advisors | Amount (\$) \$0.47 |
| | Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75251 | |
| | Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Interest | |
| Date 12/31/2024 | Name of person from whom amount is received Equitable Advisors | Amount (\$) \$0.31 |
| | Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75251 | |
| | Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Interest | |
| Date 12/03/2024 | Name of person from whom amount is received Longleaf Consulting | Amount (\$) \$3,000.00 |
| | Address of person from whom amount is received; City; State; Zip Code Austin, TX 78745 | |
| | Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Returned check not cashed | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule K: Sch: 3/3 Rpt: 10/10 |
| 2 FILER NAME Teamsters Local #745 Drive | | 3 Filer ID (Ethics Commission Filers) 00017327 |
| 4 Date 12/03/2024 | 5 Name of person from whom amount is received Moore, Gregory | 8 Amount (\$) \$500.00 |
| | 6 Address of person from whom amount is received; City; State; Zip Code Fort Worth, TX 76137 | |
| | 7 Purpose for which amount is received Returned check not cashed | <input type="checkbox"/> Check if political contribution returned to filer |