

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

<b>The GPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00061721	<b>2</b> Total pages filed: 34
<b>3</b> COMMITTEE NAME Texas Democratic Women of the South Plains PAC		<b>OFFICE USE ONLY</b>	
		Date Received ELECTRONICALLY FILED 01/14/2025	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
<b>4</b> COMMITTEE ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 6372  Lubbock, TX 79493		
	<b>5</b> CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Angela R. <hr/> NICKNAME LAST SUFFIX Martinez		
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3403 28th St.  Lubbock, TX 79410		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS  <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 6372  Lubbock, TX 79493		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (806) 239-6741		
<b>9</b> 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		
<b>10</b> PERIOD COVERED	Month Day Year      Month Day Year 07/01/2024      THROUGH      12/31/2024		
<b>11</b> 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

<b>12</b> COMMITTEE NAME Texas Democratic Women of the South Plains PAC	<b>13</b> Filer ID (Ethics Commission Filers) 00061721
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<b>14</b> COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15</b> CONTRIBUTION TOTALS	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$ 2,183.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ 4,338.00
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 2,556.51
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 0.00
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 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.

Angela R. Martinez  
\_\_\_\_\_  
Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

# SUBTOTALS - GPAC

<b>17 COMMITTEE NAME</b> Texas Democratic Women of the South Plains PAC		<b>18 Filer ID</b> (Ethics Commission Filers) 00061721
<b>19 SCHEDULE SUBTOTALS</b>		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 4,338.00
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	\$ 2,556.51
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 1/19 Rpt: 4/34
2 FILER NAME Texas Democratic Women of the South Plains PAC		3 Filer ID (Ethics Commission Filers) 00061721
4 Date 10/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Acton, Michelle	7 Amount of Contribution (\$)  \$20.00
	6 Contributor address; City; State; Zip Code  Lubbock, TX 79424	
8 Principal occupation / Job title (See Instructions) Onsite Manager		9 Employer (See Instructions) First Bank and Trust
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Aguilar, Kailey	Amount of Contribution (\$)  \$4.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79401	
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) TTU
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Alexandra, Wallace	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79424	
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 07/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ascencio, Dianah	Amount of Contribution (\$)  \$70.00
	Contributor address; City; State; Zip Code  Ranson Canyon, TX 79366	
Principal occupation / Job title (See Instructions) PR		Employer (See Instructions) Tx DOT
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bandy, Evan	Amount of Contribution (\$)  \$10.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79426	
Principal occupation / Job title (See Instructions) Chiropractor		Employer (See Instructions) The Joint

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/19 Rpt: 5/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 12/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barnes, Melanie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79410	<b>7</b> Amount of Contribution (\$)  \$120.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barrick, James <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Barrick, Susan <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$120.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bell, Eddie <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79424	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Benson, Marisela <hr/> Contributor address; City; State; Zip Code  San Diego, CA 92115	Amount of Contribution (\$)  \$14.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/19 Rpt: 6/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 09/27/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Betancourt, Alissa	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79412		
<b>8</b> Principal occupation / Job title (See Instructions) Investigator		<b>9</b> Employer (See Instructions) CPS
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bonato, Barbara	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Lubbock, TX 79416		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Botros, Dannie	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Lubbock, TX 79410		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Self
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brink, Pamela	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Lubbock, TX 79413		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Buckle, Cyndie	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code  Lubbock, TX 79416		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) TTU

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 4/19 Rpt: 7/34
2 FILER NAME Texas Democratic Women of the South Plains PAC		3 Filer ID (Ethics Commission Filers) 00061721
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkhalter, Cynthia	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code  Lubbock, TX 79413	
8 Principal occupation / Job title (See Instructions) Unknown		9 Employer (See Instructions) Unknown
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bustillos, Earlene	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79423	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bustillos, Jenny	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79412	
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bustillos, Tony	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79423	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butler, Kristina	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79413	
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) TTU Alumni Center

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/19 Rpt: 8/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 09/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cantu, Ariela	<b>7</b> Amount of Contribution (\$) \$2.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78739		
<b>8</b> Principal occupation / Job title (See Instructions) Scientist		<b>9</b> Employer (See Instructions) State of Texas
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Castillo, Gloria	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Lubbock, TX 79416		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cervantez, Heather	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Lubbock, TX 79423		
Principal occupation / Job title (See Instructions) HR		Employer (See Instructions) PCCA
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Chaney, Laurie	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Lubbock, TX 79424		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Student
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cole, Diane	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Lubbock, TX 79416		
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/19 Rpt: 9/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 09/26/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Collett, Mary <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79423	<b>7</b> Amount of Contribution (\$)  \$22.00
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions) Crash champion
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conatser, Jo <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79411	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conatser, Jo <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79411	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conner, Cheyenne <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78130	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Snooze AM
Date 10/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Conner, Cheyenne <hr/> Contributor address; City; State; Zip Code  New Braunfels, TX 78130	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Snooze AM

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 7/19 Rpt: 10/34
2 FILER NAME Texas Democratic Women of the South Plains PAC		3 Filer ID (Ethics Commission Filers) 00061721
4 Date 12/08/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Deckard, Darla	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code  Lubbock, TX 79413	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Deckard, Lance	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79413	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Diane, Wood	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79413	
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dossey, Susan	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79407	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Drewry, Zyliah	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code  Levelland, TX 79336	
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 8/19 Rpt: 11/34
2 FILER NAME Texas Democratic Women of the South Plains PAC		3 Filer ID (Ethics Commission Filers) 00061721
4 Date 09/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunham, Charlotte	7 Amount of Contribution (\$)  \$10.00
	6 Contributor address; City; State; Zip Code  Lubbock, TX 79416	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunham, Charlotte	Amount of Contribution (\$)  \$25.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79416	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Flores, Kathy	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79415	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Fuentes, Tina	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79424	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Giemza, Kristi	Amount of Contribution (\$)  \$20.00
	Contributor address; City; State; Zip Code  Lubbock, TX 79410	
Principal occupation / Job title (See Instructions) Nurse Practitioner		Employer (See Instructions) Lubbock Health Dept

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/19 Rpt: 12/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 12/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goad, Jodyne	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79416		
<b>8</b> Principal occupation / Job title (See Instructions) Unknown		<b>9</b> Employer (See Instructions) Unknown
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Goebel, Elizabeth	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Lubbock, TX 79413		
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gonzales, Louisa	Amount of Contribution (\$) \$2.00
Contributor address; City; State; Zip Code  Slaton, TX 79364		
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Slaton ISD
Date 10/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gore, Brittany	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Shallowater, TX 79363		
Principal occupation / Job title (See Instructions) Radiation Therapist		Employer (See Instructions) WTCC
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Gosner, Linda	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Lubbock, TX 79410		
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) TTU

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/19 Rpt: 13/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 12/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Grayson, Diann <hr/> <b>6</b> Contributor address; City; State; Zip Code  Idalou, TX 79329	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Green, Margo <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79407	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Harris, Kathleen <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79416	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hernandez, Aleighsha <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) Bank
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hodges, Karen <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79403	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/19 Rpt: 14/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 07/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hoover, Sheila <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79413	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Unemployed		<b>9</b> Employer (See Instructions) Unemployed
Date 12/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Hoover, Sheila <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Izeta, Adelaida <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79412	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jaushlin, Leah <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79423	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jimenez, Estefan <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79424	Amount of Contribution (\$)  \$14.00
Principal occupation / Job title (See Instructions) IT		Employer (See Instructions) AT&T

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/19 Rpt: 15/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 09/23/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Johnson, Audrey <hr/> <b>6</b> Contributor address; City; State; Zip Code  Cedar Hill, TX 75104	<b>7</b> Amount of Contribution (\$)  \$4.00
<b>8</b> Principal occupation / Job title (See Instructions) Teacher		<b>9</b> Employer (See Instructions) Lubbock ISD
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Jones, Bailey <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79404	Amount of Contribution (\$)  \$4.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Self
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Krzek, Brigid <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 08/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Lisa, Ware <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Maines, Pat <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79423	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Artist		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/19 Rpt: 16/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 12/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martin, Cindy <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79423	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Mediator		<b>9</b> Employer (See Instructions) Self
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Martin, Debie <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79407	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Healthcare		Employer (See Instructions) Healthcare
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Mawe, Kathleen <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79423	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) McLarty, Sara <hr/> Contributor address; City; State; Zip Code  Lubbock, TN 79412	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) householder		Employer (See Instructions) self
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Miller, Connie <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79424	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/19 Rpt: 17/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 12/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moore, Carolyn	<b>7</b> Amount of Contribution (\$) \$20.00
<b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79408		
<b>8</b> Principal occupation / Job title (See Instructions) Lawyer		<b>9</b> Employer (See Instructions) Lawyer
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Moriearty, Tammy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code  Lubbock, TX 79424		
Principal occupation / Job title (See Instructions) Public Health		Employer (See Instructions) DSHS
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Murphy-Ward, Michelle	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Lubbock, TX 79411		
Principal occupation / Job title (See Instructions) Doula		Employer (See Instructions) Self
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Nino-Penaloza, Sebastian	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code  Lubbock, TX 79423		
Principal occupation / Job title (See Instructions) Data Engineer		Employer (See Instructions) TTUHSC
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Page, Lola	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code  Lubbock, TX 79423		
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 15/19 Rpt: 18/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 07/30/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Pamela, Pollard <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79412	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Unemployed		<b>9</b> Employer (See Instructions) Unemployed
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parks, Robin <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79410	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Quinteros, Dylan <hr/> Contributor address; City; State; Zip Code  Tahoka, TX 79373	Amount of Contribution (\$)  \$12.00
Principal occupation / Job title (See Instructions) Laborer		Employer (See Instructions) DERT Construction
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reddick, Heather <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Reid, Sarah <hr/> Contributor address; City; State; Zip Code  Wolfforth, TX 79382	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 16/19 Rpt: 19/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 12/08/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Rogers, Grace <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79407	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ruiz, Emily <hr/> Contributor address; City; State; Zip Code  Lubbock 79403 Kazakhstan	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Sales Associate		Employer (See Instructions) Dollar General
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Shapiro, Beth <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79410	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 08/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheila, Hoover <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheila, Hoover <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 17/19 Rpt: 20/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 10/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sheila, Hoover <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79413	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) Retired
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Smith, Stephanie <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Starr, Sonya <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Unknown		Employer (See Instructions) Unknown
Date 12/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Stoll, Lyn <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) TTU
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Susan, Barrick <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 18/19 Rpt: 21/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 09/24/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Swift, Taylor <hr/> <b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79410	<b>7</b> Amount of Contribution (\$)  \$15.00
<b>8</b> Principal occupation / Job title (See Instructions) Sales		<b>9</b> Employer (See Instructions) Two Docs Brewery
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Vargas, Lizzett <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79424	Amount of Contribution (\$)  \$2.00
Principal occupation / Job title (See Instructions) Asst Manager		Employer (See Instructions) Essilorluxoticca
Date 07/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ware, Lisa <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ware, Lisa <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ware, Lisa <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79413	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 19/19 Rpt: 22/34
<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 11/14/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ware, Lisa	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>6</b> Contributor address; City; State; Zip Code  Lubbock, TX 79413		
<b>8</b> Principal occupation / Job title (See Instructions) Unemployed		<b>9</b> Employer (See Instructions) Unemployed
Date 11/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ware, Lisa	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Lubbock, TX 79413		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ware, Lisa	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Lubbock, TX 79413		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Washington, Kyra	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code  Shallowater, TX 79363		
Principal occupation / Job title (See Instructions) Substitute Teacher		Employer (See Instructions) Shallowater ISD
Date 09/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Neoma	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Hart, TX 79043		
Principal occupation / Job title (See Instructions) Unemployed		Employer (See Instructions) Unemployed

# 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.

<b>1</b> Total pages Schedule F1: Sch: 1/12 Rpt: 23/34	<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 07/07/2024	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$2.77  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online contributions.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/14/2024	Payee name ActBlue	
Amount (\$) \$0.99  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online contributions.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2024	Payee name ActBlue	
Amount (\$) \$1.58  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
Complete ONLY 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.

<b>1</b> Total pages Schedule F1: Sch: 2/12 Rpt: 24/34	<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 07/28/2024	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$0.79  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/04/2024	Payee name ActBlue	
Amount (\$) \$0.99  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/18/2024	Payee name ActBlue	
Amount (\$) \$1.78  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
Complete ONLY 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.

<b>1</b> Total pages Schedule F1: Sch: 3/12 Rpt: 25/34	<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 09/01/2024	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$0.79  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2024	Payee name ActBlue	
Amount (\$) \$0.99  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2024	Payee name ActBlue	
Amount (\$) \$2.97  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
Complete ONLY 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.

<b>1</b> Total pages Schedule F1: Sch: 4/12 Rpt: 26/34	<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00061721
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<b>4</b> Date 09/22/2024	<b>5</b> Payee name ActBlue
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<b>6</b> Amount (\$) \$6.38  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/29/2024	Payee name ActBlue
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Amount (\$) \$8.94  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/13/2024	Payee name ActBlue
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Amount (\$) \$1.58  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/12 Rpt: 27/34	<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 10/20/2024	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$1.78  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name ActBlue	
Amount (\$) \$0.40  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2024	Payee name ActBlue	
Amount (\$) \$0.79  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
Complete ONLY 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.

<b>1</b> Total pages Schedule F1: Sch: 6/12 Rpt: 28/34	<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00061721
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<b>4</b> Date 11/17/2024	<b>5</b> Payee name ActBlue
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<b>6</b> Amount (\$) \$0.99  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/01/2024	Payee name ActBlue
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Amount (\$) \$0.79  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/08/2024	Payee name ActBlue
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Amount (\$) \$9.48  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
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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.

<b>1</b> Total pages Schedule F1: Sch: 7/12 Rpt: 29/34	<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 12/15/2024	<b>5</b> Payee name ActBlue	
<b>6</b> Amount (\$) \$0.99  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code P.O.Box 441146  Somerville, MA 02144	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/22/2024	Candidate/Officeholder name ActBlue	
Amount (\$) \$0.99  <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O.Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/29/2024	Candidate/Officeholder name ActBlue	
Amount (\$) \$0.79  <input type="checkbox"/> Expenditure from corporate funds	Office sought P.O.Box 441146  Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fee for online donations.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# 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.

<b>1</b> Total pages Schedule F1: Sch: 8/12 Rpt: 30/34	<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 07/16/2024	<b>5</b> Payee name Araypa Factory, LLC	
<b>6</b> Amount (\$) \$95.24  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 55 Golden Crescent Way  Orchard Park, NY 14127	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Customized Tablecloth 4FT 6 FT 8 FT Table Runner Personalized Tablecloth for Events
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/31/2024	Payee name Barrick, Susan	
Amount (\$) \$337.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2518 57th Street  Lubbock, TX 79413	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for South Plains Fair promotional items.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 12/31/2024	Payee name Goodwin, Connie	
Amount (\$) \$200.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3109 20th St  Lubbock, TX 79410	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Membership Drive.
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.

<b>1</b> Total pages Schedule F1: Sch: 9/12 Rpt: 31/34	<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 12/31/2024	<b>5</b> Payee name Krizek, Brigid	
<b>6</b> Amount (\$) \$189.72  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3412 46th St  Lubbock, TX 79413	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for Membership Drive.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2024	Payee name Panhandle South Plains Fair	
Amount (\$) \$547.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 105 E Broadway  Lubbock, TX 79403	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Remaining balance for South Plains Fair booth
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/20/2024	Payee name Texas Democratic Women	
Amount (\$) \$35.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4609 Pangolin Dr.  Ft Worth, TX 76244	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense State portion of membership dues.
Complete ONLY 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.

<b>1</b> Total pages Schedule F1: Sch: 10/12 Rpt: 32/34	<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00061721
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<b>4</b> Date 07/31/2024	<b>5</b> Payee name Texas Democratic Women
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<b>6</b> Amount (\$) \$35.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4609 Pangolin Dr.  Ft. Worth, TX 76244
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Portion of membership dues to state.
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/01/2024	Payee name Texas Democratic Women
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Amount (\$) \$20.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4609 Pangolin Dr.  Ft Worth, TX 76244
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense State portion of membership dues.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/05/2024	Payee name Texas Democratic Women
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Amount (\$) \$25.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4609 Pangolin Dr.  Ft Worth, TX 76244
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense State portion of membership dues.
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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.

<b>1</b> Total pages Schedule F1: Sch: 11/12 Rpt: 33/34	<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00061721
<b>4</b> Date 10/19/2024	<b>5</b> Payee name Texas Democratic Women	
<b>6</b> Amount (\$) \$75.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4609 Pangolin Dr.  Ft Worth, TX 76244	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense State portion of membership dues.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name Texas Democratic Women	
Amount (\$) \$10.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4609 Pangolin Dr.  Ft Worth, TX 76244	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense State portion of membership dues.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2024	Payee name Texas Democratic Women	
Amount (\$) \$900.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 4609 Pangolin Dr.  Ft Worth, TX 76244	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense State portion of membership dues.
Complete ONLY 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.

<b>1</b> Total pages Schedule F1: Sch: 12/12 Rpt: 34/34	<b>2</b> FILER NAME Texas Democratic Women of the South Plains PAC	<b>3</b> Filer ID (Ethics Commission Filers) 00061721	
<b>4</b> Date 12/31/2024	<b>5</b> Payee name Texas Democratic Women		
<b>6</b> Amount (\$) \$40.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 4609 Pangolin Dr.  Ft Worth, TX 76244		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual state dues	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held