GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

Th	The GPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00087048			2 Total pages filed: 32	
3	COMMITTEE NAME		•	OFFICE USE ONLY	
	SEIU Texas PAC			Date Received ELECTRONICALLY FILED 01/15/2025	
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #; CIT	TY; STATE; ZIP CODE		
	ADDRESS	4299 San Felipe Street		Date Hand-delivered or Date Postmarked	
	Change of Address	Suite 200			
		Houston, TX 77027		Receipt # Amount	
				Date Processed	
				Date Processed	
				Date Imaged	
5	CAMPAIGN TREASURER	MS / MRS / MR FIRST		MI	
	NAME	Catalina			
		NICKNAME LAST		SUFFIX	
		Martinez			
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY;	STATE; ZIP CODE	
	TREASURER STREET	4299 San Felipe Street, Suite 200			
	ADDRESS				
	(Residence or Business)	Houston, TX 77027			
7	CAMPAIGN TREASURER	STREET OR PO BOX;	APT / SUITE #; CITY	; STATE; ZIP CODE	
	MAILING ADDRESS	4299 San Felipe Street, Suite 200			
	_	Houston, TX 77027			
	Change of Address				
8	CAMPAIGN TREASURER	AREA CODE PHONE NUMBER (832) 904-9755	EXTENSION		
	PHONE	(632) 904-9733			
9	REPORT	X January 15 30	Oth day before election	Dissolution (Attach PAC-DR)	
	TYPE		h day before election	10th day after campaign treasurer	
		July 15		termination	
			unoff		
10	PERIOD COVERED	Month Day Year	Month Day	Year	
		10/27/2024 Tł	HROUGH 12/31/202	4	
11	ELECTION	ELECTION DATE	ELECTION TYPE		
			Primary Runoff	Other	
		11/05/2024	General Special		
L					
	GO TO PAGE 2				
For	rms provided by Tex	xas Ethics Commission www.et	thics.state.tx.us	Version V4.1.0.5dd2ace2	

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
SEIU Texas PAC			00087048	3
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Lauren Simmons State Repres	sentative	
(Attach lists on plain paper to complete this report if necessary.)		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	PLEDGES, LOANS, CONTRIBUTIONS M	 POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold 	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	704.39
	4. TOTAL POLITICA	L EXPENDITURES	\$	16,393.89
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	76,960.35
OUTSTANDING LOAN TOTALS		MOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Catalina	Martinez	
		Signature of Ca	mpaign Treas	urer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, ti	nis the	day
of	_, 20, to certify v	vhich, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offi	cer administering oath
I Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC

Page 3 of 32

12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
SEIU Texas PAC					00087048	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ed	Sean Teare District Attorney		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	d			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	ed			
		B. Opposed	d			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ed	Colin Allred US Senate		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	d			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	ed			
		B. Opposed	d			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		ed	Kamala Harris US President		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	d			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supporte	ed			
		B. Opposed	d			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
		I				

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC

Page 4 of 32

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
SEIU Texas PAC				00087048	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Averie Bishop State Representa	itive	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Terry Meza State Representativ	e	
(Attach lists on plain paper to complete this report if necessary.)		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.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Jackie Arroyo El Paso County C	commissioner	
(Attach lists on plain paper to complete this report if necessary.)		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.)				

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC

								Page 5 of 32
12	COMMITTEE NAME						13 Filer ID	(Ethics Commission Filers)
	SEIU Texas PAC						00087048	
14	COMMITTEE ACTIVITY	1. Candidates	A. Supported	Christian	Menefee H	arris County	v Attorney	
		(Identify by name or, if applicable, classify by party.)						
	(Attach lists on plain paper to complete this		B. Opposed					
	report if necessary.)							
		2. Measures	A. Supported					
		(Describe by date and location of election and nature of issue.)						
			B. Opposed					
		3. Officeholders Assisted						
		(Identify by name or, if applicable, classify by party.)						

SUBTOTALS - GPAC	C	FORM GPAC OVER SHEET PG 3 6 of 32				
17 COMMITTEE NAME SEIU Texas PAC	18 Filer ID 00087048	(Ethics Commission Filers)				
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE	•	SUBTOTAL AMOUNT				
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 0.00				
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS					
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$				
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	OR	\$				
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPOR LABOR ORGANIZATION	ATION OR	\$				
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORC	GANIZATION	\$				
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	2	\$				
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$				
9. SCHEDULE E: LOANS		\$				
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	IS	\$ 16,393.89				
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUT	IONS	\$				
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI	ONS	\$				
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$				

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Overhea Food/Beverage Expense Polling Expens y - Gift/Awards/Memorials Expense Printing Expen	se Travel Out of District s/Contract Labor OTHER (enter a category not listed above)		
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
Sch: 1/26 Rpt: 7/32	SEIU Texas PAC	00087048		
4 Date	5 Payee name			
11/18/2024	Brown, Earlene			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$793.75	3203 Hayes Rd Apt 3105			
Expenditure from corporate funds	Houston, TX 77082			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description		
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.		
		Staff wages		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H Colin, Allred	Office held		
Date	Payee name			
	(see previous)			
Amount (\$)	Payee address; City; State; Zip Code			
Expenditure from corporate funds				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought ^H Harris, Kamala	Office held		
Date	Payee name			
	(see previous)			
Amount (\$)	Payee address; City; State; Zip Code			
Expenditure from corporate funds				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b)	Description		
EXPENDITURE		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought ^H Sean, Teare	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8	(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		al Expense Transportation Equipment & Related Expense Travel in District Travel Out of District act Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)
Sch: 2/26 Rpt: 8/32	SEIU Texas PAC	00087048
4 Date	5 Payee name (see previous)	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE		Cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought ^H Simmons, Ashley	Office held
Date	Payee name	
10/31/2024	Brown, Earlene	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,090.16	3203 Hayes Rd Apt 3105	
Expenditure from corporate funds	Houston, TX 77082	
PURPOSE OF EXPENDITURE		cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ff wages
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought ^H Allred, Colin	Office held
Date	Payee name	
	(see previous)	
Amount (\$)	Payee address; City; State; Zip Code	
Expenditure from corporate funds		
PURPOSE OF EXPENDITURE		Cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought ^H Harris, Kamala	Office held

	EXPENDITURE CATEGORIES FOR	BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Over Food/Beverage Expense Polling Expe Gift/Awards/Memorials Expense Printing Exp	ense Travel Out of District ges/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:	·	3 Filer ID (Ethics Commission Filers)
Sch: 3/26 Rpt: 9/32	SEIU Texas PAC	00087048
4 Date	5 Payee name (see previous)	·
6 Amount (\$)	7 Payee address; City; State; Zip Cod	e
Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	 b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht Office held
Date	Payee name	
	(see previous)	
Amount (\$)	Payee address; City; State; Zip Cod	e
Corporate funds PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	 b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht Office held
Date	Payee name	
11/18/2024	Franco, Belinda	
Amount (\$) \$1,144.38	Payee address; City; State; Zip Cod 302 Roberts Ave	e
Expenditure from corporate funds	Irving, TX 75060	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (Salaries/Wages/Contract Labor	 b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff wages
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht Office held

	EXPENDITURE CATEGORIES FOR	BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Over Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense Printing Expense al Committee Legal Services Salaries/W	pense Travel Out of District ages/Contract Labor OTHER (enter a category not listed above)
1 Tatal was was Oak askels 51.	The Instruction Guide explains how to cor	·
1 Total pages Schedule F1: Sch: 4/26 Rpt: 10/32	SEIU Texas PAC	3 Filer ID (Ethics Commission Filers) 00087048
4 Date	5 Payee name (see previous)	
6 Amount (#)		
6 Amount (\$)	7 Payee address; City; State; Zip Cod	16
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	(See Categories instea at the top of this schedule)	Check if travel outside of Texas. Complete Schedule T.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office souç ^H Harris, Kamala	pht Office held
Date	Payee name	
	(see previous)	
Amount (\$)	Payee address; City; State; Zip Cod	le
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office souç ^H Teare, Sean	ht Office held
Date	İ	
	Payee name (see previous)	
Amount (\$)	Payee address; City; State; Zip Cod	le
Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	 (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soug	ht Office held

	EXPENDITURE CATEGORIE	S FOR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees C Food/Beverage Expense P Gift/Awards/Memorials Expense P	oan Repayment/Reimbursement ffice Overhead/Rental Expense olling Expense alaries/Wages/Contract Labor v to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)
Sch: 5/26 Rpt: 11/32	SEIU Texas PAC		00087048
4 Date	5 Payee name	•	
10/31/2024	Franco, Belinda		
6 Amount (\$)	7 Payee address; City; State; 2	Zip Code	
\$328.13	302 Roberts Ave		
Expenditure from corporate funds	Irving, TX 75060		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedu	le) (b) Description	
OF EXPENDITURE	Salaries/Wages/Contract Labor		tside of Texas. Complete Schedule T. X, officeholder living expense
		Staff wages	A, oncenolder living expense
		Clair Hagee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O		ce sought	Office held
Date	Payee name		
	(see previous)		
Amount (\$)	Payee address; City; State; 2	Zip Code	
Expenditure from corporate funds			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedu	Check if travel ou	tside of Texas. Complete Schedule T. 'X, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder name Offi	ce sought	Office held
expenditure to benefit C/O	⁺ Harris, Kamala		
Date	Payee name		
	(see previous)		
Amount (\$)	Payee address; City; State; 2	Zip Code	
Expenditure from corporate funds			
PURPOSE	(a) Category (See Categories listed at the top of this schedu	le) (b) Description	
OF EXPENDITURE			tside of Texas. Complete Schedule T.
		Check if Austin, T	X, officeholder living expense
Complete ONLV if direct	Candidate/Officeholder name Offi	ce sought	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O		Se Sought	

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment				
1 Total pages Schedule F1:				
Sch: 6/26 Rpt: 12/32	SEIU Texas PAC 00087048			
4 Date	5 Payee name (see previous)			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
Expenditure from corporate funds				
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H Simmons, Ashley			
Date	Payee name			
11/18/2024	Gomez Jimenez, Janeth			
Amount (\$)	Payee address; City; State; Zip Code			
\$281.25	3131 Hayes Rd Apt 108			
Expenditure from corporate funds	Houston, TX 77082			
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff Wages 			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H Allred, Colin			
Date	Payee name (see previous)			
Amount (\$)	Payee address; City; State; Zip Code			
Expenditure from corporate funds				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H Harris, Kamala			

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Servic	ge Expense Memorials Expense es		Office Ove Polling Exp Printing Ex Salaries/W	rhead pense pense (ages/	e 'Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
		·			ction Guide expl	lains ho	ow to co	mple	te this form.				
1	Total pages Schedule F1:	2								3	Filer ID	(Ethics Commission File	ers)
	Sch: 7/26 Rpt: 13/32		SEIU Texas	S PAC							00087048		
4	Date		Payee name (see previou	us)									
6	Amount (\$)	7	Payee addres	ss; Ci	ty; S	State;	Zip Co	de					
	Expenditure from corporate funds												
8	PURPOSE OF EXPENDITURE	(a)	Category (Se	ee Categories	listed at the top of th	his sched	dule)	(b)			de of Texas. Com officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi Teare, Sean	ceholder r	name	Of	fice sou	ght			Office he	ld	
	Date		Payee name										
			(see previou	us)									
	Amount (\$) Expenditure from corporate funds		Payee addres	ss; Ci	ty; S	State;	Zip Co	de					
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se}	ee Categories	listed at the top of th	his sched	dule)	(b)			de of Texas. Com officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi Simmons, As		name	Of	fice sou	ght			Office he	ld	
	Date		Payee name										
	10/31/2024		Gomez Jim	enez, Jai	neth								
	Amount (\$) \$708.28		Payee addres 3131 Hayes			State;	Zip Co	de					
	Expenditure from corporate funds		Houston, TX	K 77082									
	PURPOSE OF EXPENDITURE		Category _{(Se} Salaries/Wa		listed at the top of th	his sched	dule)				de of Texas. Com officeholder living		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi Allred, Colin	ceholder r	name	Of	fice sou	ght			Office he	łd	

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		ttal Expense Transportation Equipment & Related Expense Travel in District Travel Out of District tract Labor OTHER (enter a category not listed above)			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 8/26 Rpt: 14/32	SEIU Texas PAC	00087048			
4 Date	5 Payee name				
	(see previous)				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE		SCription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought ^H Harris, Kamala	Office held			
Date	Payee name				
	(see previous)				
Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) De:	Scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H Simmons, Ashley	Office held			
Date	Payee name				
	(see previous)				
Amount (\$)	Payee address; City; State; Zip Code				
Expenditure from corporate funds					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) De:	Scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought ^H Teare, Sean	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 9/26 Rpt: 15/32	SEIU Texas PAC	00087048			
4	Date 11/18/2024	5 Payee name Lewis, Deborah				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$1,040.19	2300 Wilcrest Dr Apt#139				
	Expenditure from corporate funds	Houston, TX 77042				
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Allred, Colin	Office held			
	Date	Payee name				
		(see previous)				
	Amount (\$) Expenditure from corporate funds	Payee address; City; State; Zip Code				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Harris, Kamala	Office held			
	Date	Payee name				
		(see previous)				
	Amount (\$)	Payee address; City; State; Zip Code				
	Expenditure from corporate funds					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Teare, Sean	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food Gift// nmittee Lega	t Expense /Beverage Expense wards/Memorials Exp I Services Instruction Guide		Office Ove Polling Ex Printing Ex Salaries/W	pense ages/Contra	l Expense .ct Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2			, explaine i				3	Filer ID	(Ethics Commission Filers)
	Sch: 10/26 Rpt: 16/32	2	SEIU Texas PA	C						00087048	
4	Date	5	Payee name (see previous)								
6	Amount (\$)	7	Payee address;	City;	State;	Zip Co	de				
	Expenditure from corporate funds										
8	PURPOSE OF EXPENDITURE	(a)	Category _{(See Ca}	tegories listed at the to	op of this sche	edule)		heck if travel o		le of Texas. Com officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho Simmons, Ashley		0	office sou	ght			Office he	eld
	Date		Payee name								
	10/31/2024		Lewis, Deborah								
	Amount (\$) \$974.53		Payee address; 2300 Wilcrest D	City; 9r Apt#139	State;	Zip Co	de				
	Expenditure from corporate funds		Houston, TX 77	042							
	PURPOSE OF EXPENDITURE	(a)	Category _{(See Ca} Salaries/Wages			edule)		heck if travel o		le of Texas. Com officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho Allred, Colin	older name	0	office sou	ght			Office he	eld
	Date		Payee name (see previous)								
	Amount (\$)		Payee address;	City;	State;	Zip Co	de				
	Expenditure from corporate funds										
	PURPOSE OF EXPENDITURE	(a)	Category _{(See Ca}	tegories listed at the to	op of this sche	edule)		heck if travel o		le of Texas. Com officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho Iarris, Kamala	older name	0	office sou	ght			Office he	eld

		EXPENDITURE CATEGORIES FOR BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimb Fees Office Overhead/Rental Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contrac The Instruction Guide explains how to complete this	Expense Transportation Equipment & Related Expense Travel in District Travel Out of District t Labor OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 11/26 Rpt: 17/32	SEIU Texas PAC	00087048			
4	Date	Payee name	·			
		(see previous)				
6	Amount (\$)	Payee address; City; State; Zip Code				
	Expenditure from corporate funds					
8	PURPOSE OF EXPENDITURE		ription leck if travel outside of Texas. Complete Schedule T. leck if Austin, TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Teare, Sean	Office held			
	Date	Payee name (see previous)				
	Amount (\$) Expenditure from corporate funds	Payee address; City; State; Zip Code				
	PURPOSE OF EXPENDITURE		ription eck if travel outside of Texas. Complete Schedule T. eck if Austin, TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Simmons, Ashley	Office held			
	Date	Payee name				
	10/31/2024	Madrigal, Rosario				
	Amount (\$) \$317.66	Payee address; City; State; Zip Code 313 Evelina				
	Expenditure from corporate funds	Fabens, TX 79838				
	PURPOSE OF EXPENDITURE		ription leck if travel outside of Texas. Complete Schedule T. leck if Austin, TX, officeholder living expense WAGES			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Gift/Award Legal Serv	erage Expense Is/Memorials Exper		Office Ove Polling Ex Printing E Salaries/V	erhead cpense xpense Vages/	e 'Contract Labor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	(Ethics Commission Filers)
	Sch: 12/26 Rpt: 18/32		SEIU Texas	PAC							00087048	
4	Date		Payee name (see previou	IS)								
6	Amount (\$)	7	Payee addres	is; (City;	State;	Zip Co	ode				
	Expenditure from corporate funds											
8	PURPOSE	(a)	Category (Se	e Categori	ies listed at the top	of this sche	edule)	(b)	Description			
	OF EXPENDITURE										de of Texas. Com officeholder living	nplete Schedule T. g expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic Iarris, Kama		r name	C	Office sou	ight			Office h	eld
	Date		Payee name									
			(see previou	is)								
	Amount (\$) Expenditure from corporate funds		Payee addres	ss; (City;	State;	Zip Co	ode				
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se}	e Categori	ies listed at the top	of this sch	edule)	(b)			de of Texas. Com officeholder living	nplete Schedule T. g expense
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offic Teare, Sean	ceholde	r name	C	Office sou	ight			Office h	eld
	Date		Payee name									
			(see previou	is)								
	Amount (\$)		Payee addres	is; (City;	State;	Zip Co	ode				
	Expenditure from corporate funds											
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se}	e Categori	ies listed at the top	of this sch	edule)	(b)			de of Texas. Com officeholder living	nplete Schedule T. g expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic Simmons, As		r name	C	Office sou	ight			Office h	eld

				EXP	ENDITURE CA	TEGOR	RIES FOF	R BO	X 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Gift/Award Legal Ser	erage Expense ds/Memorials Expen		Office Ove Polling Ex Printing Ex Salaries/W	erhead pense (pense /ages/	e 'Contract Labor		Transportation E Travel in District Travel Out of Di	
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	(Ethics Commission Filers)
	Sch: 13/26 Rpt: 19/32		SEIU Texas								00087048	
4	Date	5	Payee name									
	11/18/2024		Madrigal, Ro	osario								
6	Amount (\$)	7	Payee addres	SS;	City;	State;	Zip Co	de				
	\$730.47		313 Evelina									
	Expenditure from corporate funds		Fabens, TX	79838								
8	PURPOSE	(a)	Category (Se	e Catego	ries listed at the top (of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Salaries/Wa	iges/Co	ontract Labor							nplete Schedule T.
									Staff wages	, IX,	officeholder living	g expense
									Stan Wages			
9	Complete ONLY if direct	L C	andidate/Offic	ceholde	r name	C	Office sou	ght			Office h	eld
	expenditure to benefit C/OF	ΗA	Ilred, Colin					•				
	Date		Payee name									
			(see previou	ıs)								
	Amount (\$)		Payee addres	SS;	City;	State;	Zip Co	de				
	Expenditure from corporate funds											
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se}	e Catego	ries listed at the top o	of this sche	edule)	(b)			de of Texas. Com officeholder living	nplete Schedule T. g expense
	Complete ONLY if direct		andidate/Offic	ceholde	r name	0	Office sou	aht			Office h	eld
	expenditure to benefit C/OF		larris, Kama					9			0001	
	Date		Payee name									
			(see previou	ıs)								
	Amount (\$)		Payee addres	SS;	City;	State;	Zip Co	de				
	Expenditure from corporate funds											
	PURPOSE	(a)	Category (Se	e Caterio	ries listed at the top (of this sche	edule)	(b)	Description			
	OF EXPENDITURE		_ , (00				,	-	·	outsid	de of Texas. Com	nplete Schedule T.
									Check if Austin,	, TX,	officeholder living	g expense
						-		1.1				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	1	andidate/Offic eare, Sean	cenolde	r name	C	Office sou	ght			Office h	eia
			cure, deall									

	EXPENDITURE CATEGORIES FOR B	OX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhea Food/Beverage Expense Polling Expens /- Gift/Awards/Memorials Expense Printing Expens	se Travel Out of District /Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 14/26 Rpt: 20/32	SEIU Texas PAC	00087048
4 Date	5 Payee name (see previous)	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought ^H Simmons, Ashley	Office held
Date	Payee name	
11/18/2024	Medrano, Paloma	
Amount (\$) \$203.23	Payee address; City; State; Zip Code 1090 Lang Rd Apt 2101 Portland, TX 78374	
Corporate funds PURPOSE OF EXPENDITURE		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff Wages
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought ^H Allred, Colin	Office held
Date	Payee name (see previous)	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought ^H Harris, Kamala	Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic: Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 15/26 Rpt: 21/32	SEIU Texas PAC 00087048
4 Date 10/31/2024	5 Payee name Medrano, Paloma
6 Amount (\$) \$664.86	7 Payee address; City; State; Zip Code 1090 Lang Rd Apt 2101
Expenditure from corporate funds	Portland, TX 78374
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff Wages
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
	(see previous)
Amount (\$)	Payee address; City; State; Zip Code
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/27/2024	RC Graphic Design
Amount (\$)	Payee address; City; State; Zip Code
\$259.80	12230 Coral Gate Dr
Expenditure from corporate funds	El Paso, TX 79936
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign literature
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)			
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 16/26 Rpt: 22/32	SEIU Texas PAC	00087048			
4	Date	Payee name				
	11/18/2024	Residence Inn				
6	Amount (\$)	Payee address; City; State; Zip Code				
	\$457.53	2000 State Hwy 121				
	Expenditure from corporate funds	Bedford, TX 76021				
8	PURPOSE	Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE		utside of Texas. Complete Schedule T.			
		Lodging for sta	TX, officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held			
	Date	Payee name				
	11/18/2024	Saenz, Victoria				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$328.13	246 Easy Way				
	Expenditure from corporate funds	El Paso, TX 79932				
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Allred, Colin	Office held			
	Date	Payee name				
		(see previous)				
	Amount (\$)	Payee address; City; State; Zip Code				
	Expenditure from corporate funds					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Harris, Kamala	Office held			

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 17/26 Rpt: 23/32		00087048			
4 Date	5 Payee name (see previous)				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
Expenditure from corporate funds					
8 PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought OH Arroyo Butler, Jackie	Office held			
Date	Payee name				
10/31/2024	Saenz, Victoria				
Amount (\$) \$558.44	Payee address; City; State; Zip Code 246 Easy Way				
corporate funds	El Paso, TX 79932				
PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office Sought	Office held			
Date	Payee name (see previous)				
Amount (\$)	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. in, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought OH Harris, Kamala	Office held			

	EXPENDITURE CATEGORIES FOR BO	DX 8(a)
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhea Food/Beverage Expense Polling Expense y - Gift/Awards/Memorials Expense Printing Expense	e Travel Out of District /Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 18/26 Rpt: 24/32	SEIU Texas PAC	00087048
4 Date	5 Payee name (see previous)	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought ^H Arroyo Butler, Jackie	Office held
Date	Payee name	
11/18/2024	Sutton, Watte	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,294.69	1701 Arbor Mill Cir Apt 921	
Expenditure from corporate funds	Bedford, TX 76021	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff wages
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Allred, Colin	Office held
Date	Payee name (see previous)	
Amount (\$)	Payee address; City; State; Zip Code	
corporate funds		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought ^H Harris, Kamala	Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Polit Credit Card Payment		se								
1 Total pages Schedule F1		ilore)								
Sch: 19/26 Rpt: 25/32		11015)								
4 Date										
4 Date	5 Payee name (see previous)									
6 Amount (\$)	7 Payee address; City; State; Zip Code									
Expenditure from corporate funds										
8 PURPOSE OF EXPENDITURE	 a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 									
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Teare, Sean Teare, Sean Teare, Sean Teare, Sean										
Date	Payee name									
	(see previous)									
Amount (\$)	Payee address; City; State; Zip Code									
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense									
Complete <u>ONLY</u> if direct expenditure to benefit C/										
Date	Payee name									
10/31/2024	Sutton, Watte									
Amount (\$) \$312.50	Payee address; City; State; Zip Code 0 1701 Arbor Mill Cir Apt 921									
Expenditure from corporate funds	Bedford, TX 76021									
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff wages 									
Complete <u>ONLY</u> if direct expenditure to benefit C/										

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Gift/Award Legal Serv	erage Expense Is/Memorials Exper		Office Ove Polling Ex Printing E Salaries/V	erhead kpense xpense Vages/	e 'Contract Labor		Transportation I Travel in Distric Travel Out of D		
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	(Ethics Commission File	ers)
	Sch: 20/26 Rpt: 26/32		SEIU Texas PAC 00087048										
4	Date		Payee name (see previous)										
6	Amount (\$)	7	Payee addres	is; (City;	State;	Zip Co	ode					
	Expenditure from corporate funds												
8	PURPOSE	(a)	Category (Se	e Categori	ies listed at the top	of this sche	edule)	(b)	Description				
	OF EXPENDITURE												
9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Harris, Kamala Harris, Kamala													
	Date		Payee name										
			(see previou	is)									
	Amount (\$) Expenditure from corporate funds		Payee addres	;s; (City;	State;	Zip Co	ode					
	PURPOSE OF EXPENDITURE	Category _{(Se}	e Categori	ies listed at the top	of this sche	edule)	(b)			de of Texas. Con officeholder livin	nplete Schedule T. g expense		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offic Teare, Sean	ceholde	r name	C	Office sou	ıght			Office h	eld	
	Date		Payee name										
			(see previou	IS)									
	Amount (\$)		Payee addres	is; (City;	State;	Zip Co	ode					
	Expenditure from corporate funds												
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se}	e Categori	ies listed at the top	of this sche	edule)	(b)			de of Texas. Con officeholder livin	nplete Schedule T. g expense	
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Simmons, Ashley Simmons, Ashley Simmons, Ashley												

EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment											
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)										
Sch: 21/26 Rpt: 27/32	SEIU Texas PAC 00087048										
4 Date 11/18/2024	5 Payee name Thomas, Resha										
6 Amount (\$)	7 Payee address; City; State; Zip Code										
\$258.00											
Expenditure from corporate funds	Houston, TX 77016										
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement 										
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH											
Date	Payee name										
11/27/2024	Thomas, Resha										
Amount (\$) Payee address; City; State; Zip Code											
\$33.98	7638 Caddo Rd										
Expenditure from corporate funds	Houston, TX 77016										
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mileage Reimbursement 										
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H										
Date	Payee name										
11/18/2024	Vazquez, Teresa										
Amount (\$)	Payee address; City; State; Zip Code										
\$305.00	4220 Pasadena Blvd 69										
Expenditure from corporate funds	Pasadena, TX 77503										
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff wages 										
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H Teare, Sean										

	EXPENDITURE CATEGORIES FOR BOX 8(a)													
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			FeesOffice Overhead/Rental ExpenseTFood/Beverage ExpensePolling ExpenseTGift/Awards/Memorials ExpensePrinting ExpenseT							Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2						mpic		3	Filer ID	(Ethics Commission Filers)	_	
1	Sch: 22/26 Rpt: 28/32	2	SEIU Texas								00087048			
	-			FAC							00087048			
4	Date	5	Payee name (see previous)											
6	Amount (\$)	7 Payee address; City; State; Zip Code												
	Expenditure from corporate funds													
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description														
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Allred, Colin Office sought Office held														
	Date		Payee name											
			(see previou	us)										
	Amount (\$) Expenditure from corporate funds		Payee addres	SS;	City;	State;	Zip Co	ode						
	PURPOSE OF EXPENDITURE						Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi Iarris, Kama		r name	C	Office sou	ight			Office h	eld		
	Date		Payee name										-	
			(see previou	us)										
	Amount (\$)		Payee addres	-	City;	State;	Zip Co	ode						
	Expenditure from corporate funds							-						
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se}	ee Catego	ries listed at the to	op of this sche	edule)	(b)			de of Texas. Com officeholder living	plete Schedule T. J expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi Simmons, As		r name	C	Office sou	ight			Office h	eld		

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	yment/Reimbursement thead/Rental Expense ense pense ages/Contract Labor nplete this form.		Transportation E Travel in District Travel Out of Dis					
1	Total pages Schedule F1:	2 FILER NA	ME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 23/26 Rpt: 29/32	SEIU Te>						00087048			
4	Date	5 Payee nar	ne								
	10/31/2024	Vazquez, Teresa									
6	Amount (\$)	(\$) 7 Payee address; City; State; Zip Code									
	\$1,129.22	4220 Pas	adena Blvd 69								
	Expenditure from corporate funds	Pasaden	a, TX 77503								
8	PURPOSE OF		(See Categories listed at the t		edule)	(b) Description					
	EXPENDITURE	Salaries/	Wages/Contract Lab	or				ide of Texas. Com , officeholder living			
						Staff wages	I, IA,		Jevhense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Officeholder name lin	C	Office sou	Jht		Office he	eld		
	Date	Payee nar	ne								
		(see prev	ious)								
	Amount (\$)	Payee add	Iress; City;	State;	Zip Co	de					
	Expenditure from corporate funds										
	PURPOSE	(a) Category	(See Categories listed at the t	op of this sche	edule)	(b) Description					
	OF EXPENDITURE					Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
							n, IX,	, officenoider living) expense		
	Complete ONLY if direct		Officeholder name	С	Office sou	jht		Office he	eld		
	expenditure to benefit C/Oł	H Harris, Kai	nala								
	Date	Payee nar	ne								
		(see prev	ious)								
	Amount (\$)	Payee add	lress; City;	State;	Zip Co	de					
	Expenditure from corporate funds										
	PURPOSE	(a) Category	(See Categories listed at the t	op of this sche	edule)	(b) Description					
	OF EXPENDITURE				ŕ	Check if travel	outsi	ide of Texas. Com	plete Schedule T.		
						Check if Austin	n, TX,	, officeholder living	g expense		
	Complete ONLY if direct	Candidate/	Officeholder name	ſ	Office sou	ıht		Office he	eld		
	expenditure to benefit C/OF			C		,					

EXPENDITURE CATEGORIES FOR BOX 8(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	Travel in District Travel Out of District Contract Labor OTHER (enter a category not listed above)								
1 Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)								
Sch: 24/26 Rpt: 30/32	SEIU Texas PAC	00087048								
4 Date	5 Payee name (see previous)									
6 Amount (\$) 7 Payee address; City; State; Zip Code										
Expenditure from corporate funds										
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought ¹ Teare, Sean	Office held								
Date	Payee name									
10/31/2024	Williams, Shawnya									
Amount (\$) \$1,220.63										
PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff wages								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Allred, Colin	Office held								
Date	Payee name (see previous)									
Amount (\$)	Payee address; City; State; Zip Code									
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense								
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought ¹ Harris, Kamala	Office held								

	EXPE	NDITURE CATEGORI	ES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	I Committee Gift/Awards	age Expense /Memorials Expense ces	nent Solicitation/Fundraising Transportation Equipme Travel in District Travel Out of District or OTHER (enter a catego	ent & Related Expense							
		uction Guide explains he	ow to complete this form								
1 Total pages Schedule F1:					cs Commission Filers)						
Sch: 25/26 Rpt: 31/32	SEIU Texas PAC	SEIU Texas PAC 00087048									
4 Date	5 Payee name (see previous)	-									
6 Amount (\$)	7 Payee address; C	ity; State;	Zip Code								
Expenditure from corporate funds											
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 										
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder ^H Teare, Sean	name Of	fice sought	Office held							
Date	Payee name										
	(see previous)										
Amount (\$)	Payee address; C	ity; State;	Zip Code								
PURPOSE OF EXPENDITURE	(a) Category (See Categorie	s listed at the top of this sched	Check if	ription neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder ^H Simmons, Ashley	name Of	fice sought	Office held							
Date	Payee name										
11/18/2024	Williams, Shawnya										
Amount (\$) \$1,254.69	Payee address; C 1903 Place Rebecc	-	Zip Code								
Expenditure from corporate funds	Houston, TX 77090										
PURPOSE OF EXPENDITURE	(a) Category _{(See Categorie} Salaries/Wages/Con		Check if	travel outside of Texas. Complete So Austin, TX, officeholder living expens							
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder ^H Allred, Colin	name Of	fice sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)													
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			FeesOffice Overhead/Rental ExpenseTFood/Beverage ExpensePolling ExpenseTGift/Awards/Memorials ExpensePrinting ExpenseT							Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2						mpic		3	Filer ID	(Ethics Commission Filers)		
1	Sch: 26/26 Rpt: 32/32	2	SEIU Texas								00087048			
_	-	_		FAC							00007040			
4	Date	5	Payee name (see previous)											
6	Amount (\$)	7 Payee address; City; State; Zip Code												
	Expenditure from corporate funds							ī						
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense														
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Harris, Kamala Harris, Kamala										eld				
	Date		Payee name											
			(see previou	ls)										
	Amount (\$) Expenditure from corporate funds		Payee addres	ss; (City;	State;	Zip Co	ode						
	PURPOSE OF EXPENDITURE						Check if travel of	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offic Feare, Sean	ceholder	r name	С	Office sou	ught			Office h	eld		
-	Date		Payee name											
			(see previou	ls)										
	Amount (\$)		Payee addres	-	City;	State;	Zip Co	ode						
	Expenditure from corporate funds							_						
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se}	e Categori	es listed at the top	o of this sche	edule)	(b)			de of Texas. Com officeholder living	nplete Schedule T. g expense		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offic Simmons, As		r name	C	Office sou	ught			Office h	eld		