

COUNTY EXECUTIVE COMMITTEE CAMPAIGN FINANCE REPORT

FORM CEC
COVER SHEET PG 1

The CEC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00054753	2 Total pages filed: 36
3 COMMITTEE NAME Collin County Democratic Party		OFFICE USE ONLY	
		Date Received ELECTRONICALLY FILED 01/15/2025	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address		ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 6829 K Avenue, Suite #111 Plano, TX 75074	
		Date Hand-delivered or Date Postmarked	
		Receipt #	Amount
		Date Processed	
		Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Mr. Jared	
		NICKNAME LAST SUFFIX Flores	
6 CAMPAIGN TREASURER STREET ADDRESS <small>(Residence or Business)</small>		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2932 Regal Road Plano, TX 75075	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2932 Regal Road Plano, TX 75075	
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (469) 352-5034	
9 REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Final Report <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input checked="" type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff	
10 PERIOD COVERED		Month Day Year Month Day Year 10/27/2024 THROUGH 12/31/2024	
11 ELECTION		ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other 11/05/2024 <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	

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COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC
COVER SHEET PG 2

12 COMMITTEE NAME Collin County Democratic Party	13 Filer ID (Ethics Commission Filers) 00054753
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,621.98
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 26,897.51
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 74,340.83
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Jared Flores

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 - CEC

17 COMMITTEE NAME Collin County Democratic Party		18 Filer ID (Ethics Commission Filers) 00054753
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,621.98
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 26,897.51
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 570.61

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/9 Rpt: 4/36
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agers, Linda	7 Amount of Contribution (\$) \$10.53
6 Contributor address; City; State; Zip Code Plano, TX 75023		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anil Kumar, Y	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Frisco, TX 75035		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnold, Wilma	Amount of Contribution (\$) \$31.18
Contributor address; City; State; Zip Code Plano, TX 75075		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beene, Mike	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Mckinney, TX 75071		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, Sarah	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code McKinney, TX 75072		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/9 Rpt: 5/36
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, John	7 Amount of Contribution (\$) \$30.00
6 Contributor address; City; State; Zip Code Plano, TX 75023		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casavant, Michael	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Plano, TX 75075		
Principal occupation / Job title (See Instructions) Product Manager		Employer (See Instructions) JPMorgan Chase
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caspari, Leaca	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code Farmersville, TX 75442		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chang, Helen	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Plano, TX 75093		
Principal occupation / Job title (See Instructions) Faculty		Employer (See Instructions) DCCCD
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Young, Rita	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Plano, TX 75075		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/9 Rpt: 6/36
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/21/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Mayra <hr/> 6 Contributor address; City; State; Zip Code Mckinney, TX 75069	7 Amount of Contribution (\$) \$31.18
8 Principal occupation / Job title (See Instructions) Librarian		9 Employer (See Instructions) Frisco library
Date 11/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fair Shot Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Rebecca <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Retired		Retired
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Jared <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$62.15
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Administrator		American Arbitration Association
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gant, Maria <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$10.53
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
CPA		Contran Corporation

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/9 Rpt: 7/36
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg, Charles	7 Amount of Contribution (\$) \$5.00
	6 Contributor address; City; State; Zip Code South San Francisco, TX 94080	
8 Principal occupation / Job title (See Instructions) Data Scientist		9 Employer (See Instructions) Apple
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guthrie, Doree	Amount of Contribution (\$) \$10.53
	Contributor address; City; State; Zip Code Mckinney, TX 75070	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoggard, John	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Allen, TX 75002	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Indrea, Georgiana	Amount of Contribution (\$) \$10.53
	Contributor address; City; State; Zip Code Mckinney, TX 75070	
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jernigan, Richard	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code McKinney, TX 75071	
Principal occupation / Job title (See Instructions) Video Director		Employer (See Instructions) Cambium Learning

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/9 Rpt: 8/36
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Kaitlin <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75023	7 Amount of Contribution (\$) \$10.53
8 Principal occupation / Job title (See Instructions) Unemployed		9 Employer (See Instructions) Unemployed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krishna, Sanjay <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Mavenir
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Amy <hr/> Contributor address; City; State; Zip Code Murphy, TX 75094	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) Not employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leddon, Teresa <hr/> Contributor address; City; State; Zip Code Fairview, TX 75069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ley, Adam <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Electronics Engineer		Employer (See Instructions) ASSET InterTech, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/9 Rpt: 9/36
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Heather <hr/> 6 Contributor address; City; State; Zip Code Melissa, TX 75454	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Partner Engineering
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mastenbrook, Shirley <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGarry, Kellye <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$31.18
Principal occupation / Job title (See Instructions) Marketing/PR/Communications		Employer (See Instructions) Self Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munro, Marilyn <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071	Amount of Contribution (\$) \$124.10
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) North, Laura <hr/> Contributor address; City; State; Zip Code Allen, TX 75013	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Program/Project Manager		Employer (See Instructions) AmerisourceBergen

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/9 Rpt: 10/36
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Kailex <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75074	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) Software Engineer		9 Employer (See Instructions) Capgemini
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perry, Katherine <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$5.36
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Cytiva
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pichon, Edward <hr/> Contributor address; City; State; Zip Code Mckinney, TX 75070	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineering Consultant		Employer (See Instructions) E-Qualus Partners LLC
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pursell, Tracy <hr/> Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$31.18
Principal occupation / Job title (See Instructions) Data QC		Employer (See Instructions) NewSolutions.org
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saraiya, Naishadh <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/9 Rpt: 11/36
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shenoy, Rekha <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75025	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Dentist		9 Employer (See Instructions) Prism Health of North Texas Dental Care
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sisson, Mary <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Writer		Employer (See Instructions) Self Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, David <hr/> Contributor address; City; State; Zip Code Plano, TX 75075	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Political Consultant		Employer (See Instructions) Self Employed
Date 11/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Ann <hr/> Contributor address; City; State; Zip Code McKinney, TX 75072	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Self Employed
Date 11/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stark, Sharon <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/9 Rpt: 12/36
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sutka, Jeremy <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75070	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) KJMB Solutions, Inc.
Date 11/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Donald <hr/> Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Cybersecurity Engineer		Employer (See Instructions) TAMKO Building Products

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/23 Rpt: 13/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/12/2024	5 Payee name APG&E	
6 Amount (\$) \$204.65	7 Payee address; City; State; Zip Code 6161 Savoy Drive Houston, TX 77036	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Electricity
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name APG&E	
Amount (\$) \$150.28	Payee address; City; State; Zip Code 6161 Savoy Drive Houston, TX 77036	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Electricity
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/27/2024	Payee name ActBlue Texas	
Amount (\$) \$3.97	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
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.

1	Total pages Schedule F1: Sch: 2/23 Rpt: 14/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4	Date 11/06/2024	5 Payee name ActBlue Texas	
6	Amount (\$) \$2.99	7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 11/10/2024	Payee name ActBlue Texas	
	Amount (\$) \$2.97	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 11/17/2024	Payee name ActBlue Texas	
	Amount (\$) \$0.40	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/23 Rpt: 15/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/24/2024	5 Payee name ActBlue Texas	
6 Amount (\$) \$3.97	7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/01/2024	Payee name ActBlue Texas	
Amount (\$) \$2.38	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2024	Payee name ActBlue Texas	
Amount (\$) \$1.20	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
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.

1	Total pages Schedule F1: Sch: 4/23 Rpt: 16/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4	Date 12/15/2024	5 Payee name ActBlue Texas	
6	Amount (\$) \$1.39	7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 12/22/2024	Payee name ActBlue Texas	
	Amount (\$) \$4.94	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 12/29/2024	Payee name ActBlue Texas	
	Amount (\$) \$3.18	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/23 Rpt: 17/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 12/31/2024	5 Payee name ActBlue Texas	
6 Amount (\$) \$0.79	7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/01/2024	Payee name Amazon.com	
Amount (\$) \$38.21	Payee address; City; State; Zip Code 410 Terry Ave North Seattle, WA 98109	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election night watch party dcor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/21/2024	Payee name Atmos Energy	
Amount (\$) \$94.84	Payee address; City; State; Zip Code PO Box 740353 Cincinnati, OH 45274	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Natural gas
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.

1	Total pages Schedule F1: Sch: 6/23 Rpt: 18/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4	Date 12/31/2024	5 Payee name Atmos Energy	
6	Amount (\$) \$94.84	7 Payee address; City; State; Zip Code PO Box 740353 Cincinnati, OH 45274	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Natural gas
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate/Officeholder name	Office sought	Office held
4	Date 11/01/2024	5 Payee name Beyond the Slogan Consulting	
6	Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 2710 Routh Creek Richardson, TX 75082	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Get-out-the-vote electronic billboard
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate/Officeholder name	Office sought	Office held
4	Date 12/20/2024	5 Payee name Bumperactive LLC	
6	Amount (\$) \$41.57	7 Payee address; City; State; Zip Code 5907 Burnet Road Austin, TX 78757	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchandise
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/23 Rpt: 19/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
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4 Date 11/26/2024	5 Payee name Canva
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6 Amount (\$) \$12.95	7 Payee address; City; State; Zip Code 2140 S Dupont Highway Camden, DE 19934
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web design
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/26/2024	Payee name Canva
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Amount (\$) \$12.95	Payee address; City; State; Zip Code 2140 S Dupont Highway Camden, DE 19934
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web design
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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 12/13/2024	Payee name Collin County NAACP
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 3901 San Mateo Drive Plano, TX 75023
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event sponsorship
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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.

1 Total pages Schedule F1: Sch: 8/23 Rpt: 20/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
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4 Date 11/12/2024	5 Payee name Constant Contact Inc.
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6 Amount (\$) \$300.61	7 Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/10/2024	Payee name Constant Contact Inc.
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Amount (\$) \$300.61	Payee address; City; State; Zip Code 1601 Trapelo Road Waltham, MA 02451
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Communications
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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 10/31/2024	Payee name Frisco Hall
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Amount (\$) \$1,220.00	Payee address; City; State; Zip Code 12005 Ford Road Dallas, TX 75234
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election night watch party location
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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.

1	Total pages Schedule F1: Sch: 9/23 Rpt: 21/36	2	FILER NAME Collin County Democratic Party	3	Filer ID (Ethics Commission Filers) 00054753
4	Date 11/04/2024	5	Payee name Frontier		
6	Amount (\$) \$143.76	7	Payee address; City; State; Zip Code PO Box 74047 Cincinnati, OH 45274-0407		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet service		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 12/04/2024		Payee name Frontier		
	Amount (\$) \$143.76		Payee address; City; State; Zip Code PO Box 74047 Cincinnati, OH 45274-0407		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Internet service		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 11/01/2024		Payee name Gay, Errin		
	Amount (\$) \$1,679.29		Payee address; City; State; Zip Code 1912 Fresno Rd Plano, TX 75074		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/23 Rpt: 22/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/15/2024	5 Payee name Gay, Errin	
6 Amount (\$) \$1,381.20	7 Payee address; City; State; Zip Code 1912 Fresno Rd Plano, TX 75074	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/29/2024	Payee name Gay, Errin	
Amount (\$) \$387.87	Payee address; City; State; Zip Code 1912 Fresno Rd Plano, TX 75074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/13/2024	Payee name Gay, Errin	
Amount (\$) \$690.25	Payee address; City; State; Zip Code 1912 Fresno Rd Plano, TX 75074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wages
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.

1 Total pages Schedule F1: Sch: 11/23 Rpt: 23/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
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4 Date 11/07/2024	5 Payee name Gina,
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6 Amount (\$) \$13.99	7 Payee address; City; State; Zip Code 2400 McCullough Ave San Antonio, TX 78212
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - speaker
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/07/2024	Payee name Gina,
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Amount (\$) \$26.71	Payee address; City; State; Zip Code 2400 McCullough Ave San Antonio, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - speaker
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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 11/07/2024	Payee name Gina,
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Amount (\$) \$37.64	Payee address; City; State; Zip Code 2400 McCullough Ave San Antonio, TX 78212
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - speaker
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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.

1 Total pages Schedule F1: Sch: 12/23 Rpt: 24/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/07/2024	5 Payee name Gina,	
6 Amount (\$) \$548.96	7 Payee address; City; State; Zip Code 2400 McCullough Ave San Antonio, TX 78212	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - speaker
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name Gina,	
Amount (\$) \$14.72	Payee address; City; State; Zip Code 2400 McCullough Ave San Antonio, TX 78212	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10/5/24 gala event - speaker
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2024	Payee name Google LLC	
Amount (\$) \$30.70	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/23 Rpt: 25/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
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4 Date 12/02/2024	5 Payee name Google LLC
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6 Amount (\$) \$30.70	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Google Workspace
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/19/2024	Payee name Intuit Inc.
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Amount (\$) \$122.59	Payee address; City; State; Zip Code 2800 E. Commerce Center Place Tucson, AZ 85706
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense QuickBooks Online
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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 11/19/2024	Payee name Intuit Inc.
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Amount (\$) \$165.23	Payee address; City; State; Zip Code 2800 E. Commerce Center Place Tucson, AZ 85706
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense QuickBooks Online
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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.

1 Total pages Schedule F1: Sch: 14/23 Rpt: 26/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
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4 Date 12/19/2024	5 Payee name Intuit Inc.
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6 Amount (\$) \$165.23	7 Payee address; City; State; Zip Code 2800 E. Commerce Center Place Tucson, AZ 85706
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense QuickBooks Online
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/19/2024	Payee name Intuit Inc.
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Amount (\$) \$122.59	Payee address; City; State; Zip Code 2800 E. Commerce Center Place Tucson, AZ 85706
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense QuickBooks Online
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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 12/13/2024	Payee name Kenneth L. Maun Tax Assessor-Collector
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Amount (\$) \$109.28	Payee address; City; State; Zip Code PO Box 8046 McKinney, TX 75070-8046
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Property tax
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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.

1 Total pages Schedule F1: Sch: 15/23 Rpt: 27/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/26/2024	5 Payee name Legacy Plano Master LLC	
6 Amount (\$) \$2,884.08	7 Payee address; City; State; Zip Code PO Box 803289 Dallas, TX 75380-3289	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lease payment
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/27/2024	Payee name Legacy Plano Master LLC	
Amount (\$) \$2,949.01	Payee address; City; State; Zip Code PO Box 803289 Dallas, TX 75380-3289	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Lease payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Matthews,	
Amount (\$) \$92.56	Payee address; City; State; Zip Code 3917 Montrose Drive Plano, TX 75025	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Road sign removal
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.

1	Total pages Schedule F1: Sch: 16/23 Rpt: 28/36	2	FILER NAME Collin County Democratic Party	3	Filer ID (Ethics Commission Filers) 00054753
4	Date 11/04/2024	5	Payee name NGP VAN Inc.		
6	Amount (\$) \$1,311.12	7	Payee address; City; State; Zip Code PO Box 392264 Pittsburgh, PA 15251-9264		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/02/2024		Payee name NGP VAN Inc.		
	Amount (\$) \$200.80		Payee address; City; State; Zip Code PO Box 392264 Pittsburgh, PA 15251-9264		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 11/25/2024		Payee name NGP VAN Inc.		
	Amount (\$) \$474.37		Payee address; City; State; Zip Code PO Box 392264 Pittsburgh, PA 15251-9264		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donor database monthly fee		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/23 Rpt: 29/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 12/03/2024	5 Payee name NGP VAN Inc.	
6 Amount (\$) \$474.37	7 Payee address; City; State; Zip Code PO Box 392264 Pittsburgh, PA 15251-9264	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donor database monthly fee
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/19/2024	Payee name Otter.ai, Inc.	
Amount (\$) \$92.58	Payee address; City; State; Zip Code 800 W El Camino Real Mountain View, TX 94040	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting minutes software
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2024	Payee name Otter.ai, Inc.	
Amount (\$) \$88.47	Payee address; City; State; Zip Code 800 W El Camino Real Mountain View, TX 94040	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meeting minutes software
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.

1 Total pages Schedule F1: Sch: 18/23 Rpt: 30/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 11/05/2024	5 Payee name Party City Plano East	
6 Amount (\$) \$51.94	7 Payee address; City; State; Zip Code 3308 North Central Expwy Plano, TX 75074	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election night watch party dcor
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/09/2024	Payee name Plano Police Department - Alarms Unit	
Amount (\$) \$100.00	Payee address; City; State; Zip Code PO Box 860358 Plano, TX 75086	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Alarm permit
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/07/2024	Payee name Prosperity Bank	
Amount (\$) \$35.00	Payee address; City; State; Zip Code PO Box 869105 Plano, TX 75086	
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 Stop check fee
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.

1 Total pages Schedule F1: Sch: 19/23 Rpt: 31/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/30/2024	5 Payee name Simplisafe Inc.	
6 Amount (\$) \$34.63	7 Payee address; City; State; Zip Code 294 Washington St Boston, MA 02108	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security monitoring
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2024	Payee name Simplisafe Inc.	
Amount (\$) \$34.63	Payee address; City; State; Zip Code 294 Washington St Boston, MA 02108	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security monitoring
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/30/2024	Payee name Simplisafe Inc.	
Amount (\$) \$34.63	Payee address; City; State; Zip Code 294 Washington St Boston, MA 02108	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Security monitoring
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.

1 Total pages Schedule F1: Sch: 20/23 Rpt: 32/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
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4 Date 11/08/2024	5 Payee name Tijerina,
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6 Amount (\$) \$785.23	7 Payee address; City; State; Zip Code 2304 Eldger Drive Plano, TX 75025
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election night watch party food
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/08/2024	Payee name Tijerina,
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Amount (\$) \$409.03	Payee address; City; State; Zip Code 2304 Eldger Drive Plano, TX 75025
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Election night watch party food
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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 12/16/2024	Payee name USPS (McKinney)
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Amount (\$) \$73.00	Payee address; City; State; Zip Code 550 N Central Expy McKinney, TX 75070
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps
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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.

1 Total pages Schedule F1: Sch: 21/23 Rpt: 33/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 12/16/2024	5 Payee name USPS (McKinney)	
6 Amount (\$) \$29.20	7 Payee address; City; State; Zip Code 550 N Central Expy McKinney, TX 75070	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Stamps
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2024	Payee name United States Treasury	
Amount (\$) \$1,011.18	Payee address; City; State; Zip Code Internal Revenue Service Ogden, UT 84201	
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 Payroll Taxes
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2024	Payee name United States Treasury	
Amount (\$) \$899.62	Payee address; City; State; Zip Code Internal Revenue Service Ogden, UT 84201	
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 Payroll Taxes
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.

1 Total pages Schedule F1: Sch: 22/23 Rpt: 34/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
4 Date 12/11/2024	5 Payee name VistaPrint	
6 Amount (\$) \$125.84	7 Payee address; City; State; Zip Code 275 Wyman Street Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Holiday cards
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/18/2024	Payee name Vonage Business Inc	
Amount (\$) \$142.73	Payee address; City; State; Zip Code Dept. 3151 Dallas, TX 75312-3151	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telephone service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2024	Payee name Vonage Business Inc	
Amount (\$) \$142.73	Payee address; City; State; Zip Code Dept. 3151 Dallas, TX 75312-3151	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Telephone service
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.

1 Total pages Schedule F1: Sch: 23/23 Rpt: 35/36	2 FILER NAME Collin County Democratic Party	3 Filer ID (Ethics Commission Filers) 00054753
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4 Date 11/26/2024	5 Payee name Zoom Video Communications Inc.
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6 Amount (\$) \$53.30	7 Payee address; City; State; Zip Code 55 Amaden Blvd San Jose, CA 95113
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly fee
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/26/2024	Payee name Zoom Video Communications Inc.
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Amount (\$) \$53.30	Payee address; City; State; Zip Code 55 Amaden Blvd San Jose, CA 95113
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Monthly fee
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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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INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 36/36
2 FILER NAME Collin County Democratic Party		3 Filer ID (Ethics Commission Filers) 00054753
4 Date 10/31/2024	5 Name of person from whom amount is received Prosperity Bank <hr/> 6 Address of person from whom amount is received; City; State; Zip Code Plano, TX 75086	8 Amount (\$) \$56.07
7 Purpose for which amount is received Bank Interest <input type="checkbox"/> Check if political contribution returned to filer		
Date 11/30/2024	Name of person from whom amount is received Prosperity Bank <hr/> Address of person from whom amount is received; City; State; Zip Code Plano, TX 75086	Amount (\$) \$54.33
Purpose for which amount is received Bank Interest <input type="checkbox"/> Check if political contribution returned to filer		
Date 12/31/2024	Name of person from whom amount is received Prosperity Bank <hr/> Address of person from whom amount is received; City; State; Zip Code Plano, TX 75086	Amount (\$) \$56.21
Purpose for which amount is received Bank Interest <input type="checkbox"/> Check if political contribution returned to filer		
Date 11/05/2024	Name of person from whom amount is received The Reiss Group <hr/> Address of person from whom amount is received; City; State; Zip Code McKinney, TX 75069	Amount (\$) \$404.00
Purpose for which amount is received Refund for unused ad <input type="checkbox"/> Check if political contribution returned to filer		