#### FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00088639 3 COMMITTEE NAME **OFFICE USE ONLY** TCE VoteClean.org Date Received **ELECTRONICALLY FILED** 01/15/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO Box 42278 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78704 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Jose Rodrigo NAME NICKNAME LAST **SUFFIX** Leal STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 4812 Eastdale Drive STREET **ADDRESS** (Residence or Business) Austin, TX 78723 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 4812 Eastdale Drive MAILING **ADDRESS** Austin, TX 78723 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 660-9499 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 12/06/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Other X Runoff 12/14/2024 General Special **GO TO PAGE 2**

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
TCE VoteClean.org			00088639	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Billy Lerma Corpus Christi City	/ Council Dis	trict 1
(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.)			
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M X check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	15,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	45,973.14
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	82,483.25
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	30,000.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Jose F	Rodrigo Leal	
		Signature of Ca	mpaign Treası	ırer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed I	before me, by the said	, ti	his the	day
		which, witness my hand and seal of office.		
Signature of officer adn	ninistering oath	Printed name of officer administering oath	Title of offi	cer administering oath

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

### FORM GPAC ADDENDUM

Page 3 of 19

				1 ago o o 1 10
12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
TCE VoteClean.org				00088639
14 COMMITTEE 1. ACTIVITY (IC	. Candidates dentify by name or, if oplicable, classify by party.)	A. Supported	Kaylynn Paxson Corpus Christi	City Council District 4
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
2	. Measures	A. Supported		
(D	Describe by date and cation of election and ature of issue.)	22,4		
		B. Opposed		
(Ic	. Officeholders Assisted dentify by name or, if oplicable, classify by party.)			
COMMITTEE 1	. Candidates	A. Supported		
ACTIVITY (Id	dentify by name or, if oplicable, classify by party.)	7. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	Everett Roy Corpus Christi City	Council District 1
(D	. Measures Describe by date and cation of election and ature of issue.)	A. Supported		
		B. Opposed		
(Ic	. Officeholders Assisted dentify by name or, if oplicable, classify by party.)			
COMMITTEE 1. ACTIVITY (10		A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed	May Nardone Mendoza Corpus	Christi City Council District 4
(D	. Measures Describe by date and cation of election and ature of issue.)	A. Supported		
		B. Opposed		
(Ic	. Officeholders Assisted dentify by name or, if oplicable, classify by party.)			
a.		<u> </u>		

### **SUBTOTALS - GPAC**

## FORM **GPAC**COVER SHEET PG 3

	4 of 19
17 COMMITTEE NAME         18 Filer ID           TCE VoteClean.org         0008863	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. X SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 15,000.00
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	ON <b>\$</b>
9. SCHEDULE E: LOANS	\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 44,963.69
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 1,009.45
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$
	·

## MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

#### SCHEDULE C1

	The Instruction Guide explains how to complete this form.			1	Total pages Schedule C1: Sch: 1/1 Rpt: 5/19
2	? FILER NAME		3	Filer ID (Ethics Commission Filers)	
	TCE VoteClean.org				00088639
4	Date	5	Corporation / Labor Organization name	7	Amount of contribution (\$)
	12/16/2024		Local jobs and Economic Development		\$15,000.00
		6	Corporation / Labor Organization address; City; State; Zip Code		
			Dover, DE 19901		

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contribution/ Officeholder/Political Committee

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

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

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

xpense Travel in District
Expense Travel Out of Distr
Wages/Contract Labor OTHER (enter a c

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
TTALE (Control of State Control of C

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/11 Rpt: 6/19	TCE VoteClean.org 00088639
4 Date	5 Payee name
12/31/2024	Alvarado, Beatriz
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$432.96	910 Ohio Avenue
	Apt 2
Expenditure from corporate funds	Corpus Christi, TX 78404
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
	Check if Austin, TX, officeholder living expense  Wages to benefit candidates without their knowledge
	or consent.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
	(see previous)
Amount (\$)	Payee address; City; State; Zip Code
Expenditure from corporate funds	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Paxson, Kaylynn Corpus Christi City Council
Date	Payee name
12/31/2024	Benavides, Cody
Amount (\$)	Payee address; City; State; Zip Code
\$334.88	7422 San Remo Ct
Expenditure from corporate funds	Corpus Christi, TX 78414
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Wages paid to benefit candidates without their
	knowledge or consent
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	Lerma, Billy Corpus Christi City Councnil

#### SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to co	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 2/11 Rpt: 7/19	TCE VoteClean.org	00088639	
4 Date	5 Payee name	·	
	(see previous)		
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode	
Expenditure from corporate funds			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE		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 sou	I ght Office held	
expenditure to benefit C/O		Christi City Council	
Date	Payee name		
12/31/2024	Burks, Isaiah		
Amount (\$)	Payee address; City; State; Zip Co	ode	
\$2,586.93	7117 Wood Hollow Dr		
	Apt 728		
Expenditure from corporate funds	Austin, TX 78731		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Wages paid to benefit candidates without their	
		knowledge or consent.	
Complete ONLY if direct	Candidate/Officeholder name Office sou	I ght Office held	
expenditure to benefit C/OI	H Lerma, Billy Corpus C	Christi City Council	
Date	Payee name		
	(see previous)		
Amount (\$)	Payee address; City; State; Zip Co	ode	
· · /			
Expenditure from corporate funds			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF	(See Categories listed at the top of this schedule)	Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE		Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou		
experience to belief 5.5.	expenditure to benefit C/OH Paxson, Kaylynn Corpus Christi City Council		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Indeed, the street of the street of

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	OTTER (enter a category not isseet above)
1 Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
Sch: 3/11 Rpt: 8/19	TCE VoteClean.org		00088639
4 Date	5 Payee name		
12/31/2024	Clowdus, Charlie		
6 Amount (\$)	7 Payee address; City; State; Zip C	Code	
\$544.05	6130 Coralridge Dr		
Expenditure from corporate funds	Corpus Christi, TX 78413		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE	Salaries/Wages/Contract Labor		utside of Texas. Complete Schedule T. TX, officeholder living expense
		_ <del>_</del>	benefit candidate without their
		knowledge or	
9 Complete ONLY if direct	Candidate/Officeholder name Office so	 ought	Office held
expenditure to benefit C/O		Christi City Council	
Date	Payee name		
Date	(see previous)		
Amount (\$)	Payee address; City; State; Zip C	- Coda	
Amount ( $\phi$ )	Payee address, City, State, Zip C	Joue	
Expenditure from			
corporate funds			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
EXPENDITURE			utside of Texas. Complete Schedule T. TX, officeholder living expense
			1A, Ullicendider living expense
Complete ONLY if direct	Candidate/Officeholder name Office so	 ought	Office held
expenditure to benefit C/O		Christi City Council	
Date	Payee name		
12/31/2024	Cota, Ale		
Amount (\$)	Payee address; City; State; Zip C		
\$1,370.20	6635 S Staples St	Joue	
Ψ±,Ο1Ο.ΕΟ	#1214		
Expenditure from			
corporate funds	Corpus Christi, TX 78413		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	tride of Tours Complete Cabadula T
EXPENDITURE	Salaries/Wages/Contract Labor	· ·	utside of Texas. Complete Schedule T. TX, officeholder living expense
		_	benefit candidate without their
		knowledge or	
Complete ONLY if direct	Candidate/Officeholder name Office so	 ought	Office held
expenditure to benefit C/O		Christi City Council	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 4/11 Rpt: 9/19	TCE VoteClean.org	00088639	
4 Date	5 Payee name	· '	
	(see previous)		
6 Amount (\$)	7 Payee address; City; State; Zip C	rode	
Expenditure from corporate funds			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF	(a) Category (See Categories listed at the top of this schedule)	Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE		Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	-	
experialiture to benefit C/O	Paxson, Kaylynn Corpus	Christi City Council	
Date	Payee name		
12/19/2024	Cunningham, Deonte		
Amount (\$)	Payee address; City; State; Zip C	rode	
\$1,852.83	6334 S Padre Island Dr, G		
X Expenditure from corporate funds	Corpus Christi, TX 78412		
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.	
EXPENDITORE	-	Check if Austin, TX, officeholder living expense	
		Wages that benefited the candidates without their knowledge or awareness.	
Operation ONLY if allowed	Oscalidate (Office hadden a series		
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office solution  Lerma, Billy Corpus	ught Office held Christi City Council	
		Christi City Council	
Date	Payee name		
	(see previous)		
Amount (\$)	Payee address; City; State; Zip C	rode	
Expenditure from			
corporate funds			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE		Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held	
	expenditure to benefit C/OH Paxson, Kaylynn Corpus Christi City Council		
		-	

#### SCHEDULE F1

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

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

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

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 5/11 Rpt: 10/19	TCE VoteClean.org	00088639
4 Date	5 Payee name	
12/19/2024	De Santiago-Young, Dena	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$1,505.27	POBox 81258	
X Expenditure from corporate funds	Corpus Christi, TX 78468	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor	Check if Austin, TX, officeholder living expense
		Wages to support the campaigns without the
		candidates knowledge or consent
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soil	-
	Lerma, Billy Corpus	Christi City Council
Date	Payee name	
. (4)	(see previous)	
Amount (\$)	Payee address; City; State; Zip C	ode
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/OI	Candidate/Officeholder name Office soil	
experiantific to belieff 6/01	Paxson, Kaylynn Corpus	Christi City Council
Date	Payee name	
12/31/2024	Espino, Jennifer	
Amount (\$)	Payee address; City; State; Zip C	ode
\$148.50	1805 Amazon Dr	
X Expenditure from corporate funds	Corpus Christi, TX 78412	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Wages paid to benefit candidate without their
		knowledge or consent.
Complete ONLY if direct	Candidate/Officeholder name Office so	
expenditure to benefit C/OI	H Lerma, Billy Corpus	Christi City Council

### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense
Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 6/11 Rpt: 11/19	TCE VoteClean.org	00088639
4	Date	5 Payee name	<u> </u>
		(see previous)	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	Expenditure from corporate funds		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF	(See Categories listed at the top of this scriedule)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
_			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
		Paxson, Kaylynn Corpus Chri	sti City Council
	Date	Payee name	
	12/19/2024	Fain, Laramie	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$19.74	1035 Wilshire Pl	
_	T Expenditure from		
L	corporate funds	Corpus Christi, TX 78411	
	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.  Check if Austin, TX, officeholder living expense
			Wages to support the campaigns without the
			candidates knowledge or consent
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF		sti City Council
	Date	Payee name	
		(see previous)	
	Amount (\$)	Payee address; City; State; Zip Code	
	7 uno una (+)	. ayoo aaa.ooo,	
	Expenditure from corporate funds		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF	(a) Category (See Categories listed at the top of this schedule)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	emportantare to beliefit 6/01	Paxson, Kaylynn Corpus Chri	sti City Council

#### SCHEDULE F1

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

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

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

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 7/11 Rpt: 12/19	TCE VoteClean.org	00088639
4 Date	5 Payee name	
12/31/2024	Hensiek, Autumn	
6 Amount (\$) \$717.60	7 Payee address; City; State; Zip C 325 Louisiana Ave	ode
Ψ/17.00	323 Edulsiana / We	
Expenditure from corporate funds	Corpus Christi, TX 78404	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Salaries/Wages/Contract Labor	Check if Austin, TX, officeholder living expense
		Wages to benefit candidates paid without their knowledge or consent.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office so	ught Office held Christi City Council
Date		
Date	Payee name (see previous)	
Amount (\$)	Payee address; City; State; Zip C	ode
. ,		
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/OI	Candidate/Officeholder name Office sol	ught Office held Christi City Council
Data		Chilisti City Council
Date 12/11/2024	Payee name Kelly Graphics	
Amount (\$)	Payee address; City; State; Zip C	nde
\$33,521.88	1409 Quaker Ridge	
X Expenditure from corporate funds	Austin, TX 78746	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Printing and mailing of materials to support
		candidates without their knowledge.
Complete ONLY if direct	Candidate/Officeholder name Office so	
expenditure to benefit C/OI	1 Lerma, Billy Corpus	Christi City Council

#### SCHEDULE F1

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

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

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

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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 8/11 Rpt: 13/19	TCE VoteClean.org	00088639	
4 Date	5 Payee name	-	
	(see previous)		
6 Amount (\$)	7 Payee address; City; State; Zip C	ode	
Expenditure from corporate funds			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
OF EXPENDITURE	(See Categories listed at the top of this scriedule)	Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE		Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	-	
	Paxson, Laylynn Corpus	Christi City Council	
Date	Payee name		
12/19/2024	Lebowitz, Aryeh		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$552.20	6121 Boca Raton Dr		
Expenditure from			
x corporate funds	Corpus Christi, TX 78413		
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.	
		Check if Austin, TX, officeholder living expense  Wages that benefited the candidates without their	
		knowledge or awareness.	
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held	
expenditure to benefit C/O		Christi City Council	
Data			
Date	Payee name (see previous)		
	` ' '		
Amount (\$)	Payee address; City; State; Zip C	ode	
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	
		Circle in Addition, 174, directional inviting expense	
Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held	
	expenditure to benefit C/OH Paxson, Kaylynn Corpus Christi City Council		
	·		

#### 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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 9/11 Rpt: 14/19	TCE VoteClean.org	00088639
4 Date	5 Payee name	•
12/19/2024	Richardson, Zion	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$495.00	3118 Quebec Dr	
Expenditure from		
corporate funds	Corpus Christi, TX 78414	
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.
		Check if Austin, TX, officeholder living expense  Wages to support the campaigns without the
		candidates knowledge or consent
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/O	1	Christi City Council
Date	Payee name	
	(see previous)	
Amount (\$)	Payee address; City; State; Zip C	ode
, ,	,	
Expenditure from corporate funds		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE		Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/O	1	Christi City Council
Date	Payee name	
12/31/2024	Schneider, Robin	
Amount (\$)	Payee address; City; State; Zip C	ode
\$242.92	2609 Sherwood Lane	
Expenditure from corporate funds	Austin, TX 78704	
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.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Wages paid to benefit candidates without their knowledge or consent
Complete ONLY if direct	Condidate/Officeholder name	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught Office held Christi City Council
•	Lerma, Billy Corpus	orman only countries

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Credit Card Payment	The Instruction Guide explains how to o	complete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 10/11 Rpt: 15/19	TCE VoteClean.org	00088639
4 Date	5 Payee name	
	(see previous)	
6 Amount (\$)	7 Payee address; City; State; Zip C	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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office so Paxson, Kaylynn Corpus	ought Office held Christi City Council
Date	Payee name	
12/31/2024	Thomas, Leewana	
Amount (\$)	Payee address; City; State; Zip (	Code
\$125.49	4527 Osage Ave	
X Expenditure from corporate funds	Philadelphia, PA 19143	
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  Wages paid to benefit candidate without their knowledge or consent
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ought Office held Christi City Council
		Cimot City Countries
Date	Payee name (see previous)	
Amount (\$)	Payee address; City; State; Zip C	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/OI	Candidate/Officeholder name Office so Jaxson, Kaylynn Corpus	ought Office held Christi City Council

#### SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officenolder/Politica	The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	$\neg$			
Sch: 11/11 Rpt: 16/19	TCE VoteClean.org 00088639				
4 Date	5 Payee name				
12/31/2024	Toren, Cuauhtemoc				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$513.24	7103 Circle S Rd				
X Expenditure from corporate funds	Austin, TX 78745				
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Salaries/Wages/Contract Labor				
	Check if Austin, TX, officeholder living expense  Wages paid to benefit candidate without their				
	knowledge or consent.				
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI					
	Corpus Criristi City Council				
Date	Payee name				
	(see previous)				
Amount (\$)	Payee address; City; State; Zip Code				
Expenditure from corporate funds					
	(A) a	_			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Check if Austin, TX, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_			
expenditure to benefit C/OI					
		_			

#### **EXPENDITURES MADE BY CREDIT CARD**

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

SSUER   Ramp (Visa)   EXPENDITURES CHARGED TO A CREDIT CARD   STAND		The Insti	ruction Guide explains how	to complete this form.					
Name of financial institution Ramp (Visa)   S TOTAL OF UNITEMIZED CHARGED TO A CREDIT SUBSET	1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	3 Filer ID (Ethics Commission Filers)			
Ramp (Visa)   CARGED TO A CREDIT CARD	Sch: 1/3 Rpt: 17/19	TCE VoteClean.org			00088639				
Candidate/Officeholder   Candidate/Officehol		Ramp (Visa) EXPENDITURES CHARGED TO A CREDIT			\$				
Corporate funds	6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid				
ARC Documents Solutions  ARC Documents Solutions    Second Complete Schedule   Payment		\$148.32	12/06/2024						
S PURPOSE OF EXPENDITURE   Conception   Co	7 PAYEE			822 Leopard St.		State,	Zip Code		
EXPENDITURE   Political		(a) Cataman			)1				
9 Complete QNLY if direct expenditure to benefit C/OH	EXPENDITURE	(See Categories listed at the top of this schedule)  Printing and mailing on be							
expenditure to benefit C/OH  PAYMENT    Candidate/Office holder name   Candidate   Corpus Christic   C	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	ΓX, officeholder living ex	pense			
PAYEE  (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid  (a) Amount Charged (b) Payee address; City, State, Zip Code  (see previous)  (a) Category (See Categories listed at the top of this schedule)  Complete QNLY if direct expenditure from corporate funds  PAYEE  (a) Category (See Categories listed at the top of this schedule)  (c) Check if travel outside of Texas. Complete Schedule T. Complete QNLY if direct expenditure to benefit C/OH  PAYMENT  Expenditure from corporate funds  PAYEE  (a) Amount Charged (b) Date of Charge (b) Description  (b) Description  Corpus Christi City Council  PAYEE  (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid  (c) Date(s) Credit Card Issuer Paid  (d) Payee name (d) Payee address; City, State, Zip Code 13742 Harper St. Scale to Win  Santa Ana, CA 92703  (b) Payee address; City, State, Zip Code 13742 Harper St. Scale to Win  PURPOSE OF EXPENDITURE  Advertising expense on behalf of candidates who were not aware of or consulted the expenditures.  (c) Check if travel outside of Texas. Complete Schedule T. Complete QNLY if direct  Candidate/Officeholder name Office sought Office held	9 Complete ONLY if direct	Candidate/Officeholder		•	Office held				
Expenditure from corporate funds    PAYEE	expenditure to benefit C/OH								
(see previous)    Purpose of Expenditure   (a) Category (see Categories listed at the top of this schedule)   (b) Description	Expenditure from	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issi	uer Paid				
PURPOSE OF EXPENDITURE    Political	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
EXPENDITURE    Political		(see previous)							
Complete ONLY if direct expenditure to benefit C/OH Paxson, Laylynn Corpus Christi City Council  PAYMENT  Expenditure from corporate funds  PAYEE  (a) Payee name Scale to Win  PURPOSE OF EXPENDITURE  X Political  Non-Political  Non-Political  Complete ONLY if direct expenditure for make to possible and the top of this schedule) Advertising Expense  Candidate/Officeholder name Office sought Corpus Christi City Council  (c) Date(s) Credit Card Issuer Paid  (b) Payee address; City, State, Zip Code 13742 Harper St.  Santa Ana, CA 92703  (b) Description Advertising expenses on behalf of candidates who were not aware of or consulted the expenditures.  (c) Candidate/Officeholder name Office sought Office sought Office held	EXPENDITURE	1 ' ' '	of this schedule)	(b) Description					
Complete ONLY if direct expenditure to benefit C/OH Paxson, Laylynn Corpus Christi City Council  PAYMENT  Expenditure from corporate funds  Avertising Expense  Non-Political  Non-Political  Candidate/Officeholder name Compus Christi City Council  (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid  (b) Payee address; City, State, Zip Code 13742 Harper St.  Santa Ana, CA 92703  (b) Description  Advertising expenses on behalf of candidates who were not aware of or consulted the expenditures.  Complete ONLY if direct  Candidate/Officeholder name Office sought Office sought Office held  Office held	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living ex	pense			
expenditure to benefit C/OH  PAYMENT  Expenditure from corporate funds  (a) Amount Charged \$268.89  12/06/2024  (b) Date of Charge 12/06/2024  (c) Date(s) Credit Card Issuer Paid  (d) Payee name Scale to Win  PAYEE  (a) Payee name Scale to Win  PURPOSE OF EXPENDITURE  X Political Non-Political  Non-Political  Complete ONLY if direct  (a) Amount Charged (b) Date of Charge (b) Payee address; City, State, Zip Code 13742 Harper St.  Santa Ana, CA 92703  (b) Description Advertising expenses on behalf of candidates who were not aware of or consulted the expenditures.  (c) Check if travel outside of Texas. Complete Schedule T.  Candidate/Officeholder name  Office sought  Office held	Complete ONLY if direct	\(\frac{1}{2}\)	<u> </u>						
Expenditure from corporate funds  \$268.89  12/06/2024  (a) Payee name Scale to Win  PURPOSE OF EXPENDITURE		Paxson, Laylynn	Corp	us Christi City Council					
Expenditure from corporate funds  \$268.89  12/06/2024  (a) Payee name Scale to Win  PURPOSE OF EXPENDITURE	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid				
Scale to Win  PURPOSE OF EXPENDITURE    X   Political   Non-Political   Complete ONLY if direct   Candidate/Officeholder name   Office sought   13742 Harper St.    Santa Ana, CA 92703   (b) Description   Advertising expenses on behalf of candidates who were not aware of or consulted the expenditures.    Complete ONLY if direct   Candidate/Officeholder name   Office sought   Office held		\$268.89	12/06/2024						
Scale to Win  Santa Ana, CA 92703  PURPOSE OF EXPENDITURE    X   Political   Non-Political   Complete ONLY if direct   Candidate/Officeholder name   Office sought   Office held	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE    X   Political   Non-Political   Complete ONLY if direct   Candidate/Officeholder name   Candidate/Officeholder name   Office sought   City   Description		Scale to Win		13742 Harper St.					
EXPENDITURE    See Categories listed at the top of this schedule)   Advertising expenses on behalf of candidates who were not aware of or consulted the expenditures.    Non-Political   Complete ONLY if direct   Candidate/Officeholder name   Office sought   Office held									
Advertising Expense  Advertising Expense  Advertising Expense  Advertising expenses on behalf of calculates who were not aware of or consulted the expenditures.  (c) Check if travel outside of Texas. Complete Schedule T.  Complete ONLY if direct  Candidate/Officeholder name  Office sought  Office held		1 1 2 3							
Complete ONLY if direct Candidate/Officeholder name Office sought Office held		1 ' '					o were not		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	ΓX, officeholder living ex	pense			
				-	Office held				

#### **EXPENDITURES MADE BY CREDIT CARD**

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense

Candidate/Officeriolide//Folitica	· · · · · · · · · · · · · · · · · · ·	ruction Guide explains ho	•	THEN (enter a category i	ioi iisteu at	Jove)	
1 Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)			
Sch: 2/3 Rpt: 18/19	TCE VoteClean.org			00088639			
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
Expenditure from corporate funds							
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	(see previous)						
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)					
Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living expen	se		
9 Complete ONLY if direct	Candidate/Officeholder	name Offi	ce sought	Office held			
expenditure to benefit C/OH	Paxson, Kaylynn	Col	rpus Christi City Council				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
Expenditure from corporate funds	\$439.51	12/06/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	ARC Documents Solutions		822 Leopard St.				
			Corpus Christi, TX 78401				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Printing Expense	of this schedule)	Printing and mailing on be		es witho	out their	
X Political	· · ·······   ·   ·   ·		knowledge or awareness.	•			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expen	se		
Complete ONLY if direct	Candidate/Officeholder		ce sought	Office held			
expenditure to benefit C/OH	Lerma, Billy		rpus Christi City Council				
l —	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
Expenditure from corporate funds							
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	(see previous)						
	(3cc previous)						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description				
Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living expen	se		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
expenditure to benefit C/OH	Paxson, Kaylynn Corpus Christi City Council						

#### **EXPENDITURES MADE BY CREDIT CARD**

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(a)**

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete th	nis form.			,
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 3/3 Rpt: 19/19				00088639			
4 CREDIT CARD ISSUER	Name of financial institution  See previous  See previous  See previous  See previous  CHARGED TO A CREDIT CARD			\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (	Credit Card Issuer	r Paid		
Expenditure from corporate funds	\$152.73	12/10/2024					
7 PAYEE	(a) Payee name  ARC Documents Solutions		(b) Payee at 822 Leopa		City,	State,	Zip Code
8 PURPOSE OF	(a) Category		(b) Descripti				
EXPENDITURE  X Political		(See Categories listed at the top of this schedule)  Printing and Mailing on be			ehalf of candidates without their		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder		e sought		Office held		
expenditure to benefit C/OH	Lerma, Billy	Corp	us Christi C	ity Council			
PAYMENT  Expenditure from corporate funds	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer			
PAYEE	(a) Payee name (see previous)		(b) Payee a	ddress;	City,	State,	Zip Code
PURPOSE OF EXPENDITURE Political	(a) Category (See Categories listed at the top	(a) Category (See Categories listed at the top of this schedule)  (b) Description					
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	Г	Theck if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder		e sought		Office held		
expenditure to benefit C/OH	Paxson, Kaylynn	Corp	ous Christi C	ity Council			