

COUNTY EXECUTIVE COMMITTEE REPORT: PURPOSE & TOTALS

FORM CEC
COVER SHEET PG 2

12 COMMITTEE NAME Taylor County Democratic PAC (CEC)	13 Filer ID (Ethics Commission Filers) 00016594
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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)	\$ 5,001.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 12,903.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 9,106.99
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,231.99
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.

Dianne Morpew

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**FORM CEC**
COVER SHEET PG 3
3 of 39

17 COMMITTEE NAME Taylor County Democratic PAC (CEC)		18 Filer ID 00016594	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	12,528.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	375.00
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	\$	9,106.99
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	\$	1,385.57

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/20 Rpt: 4/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alvaredo, Rick	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code Abilene, TX 79605	
8 Principal occupation / Job title (See Instructions) Media		9 Employer (See Instructions) Texas State Technical College
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armstrong, Terry (Mrs.)	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Merkel, TX 79536	
Principal occupation / Job title (See Instructions) Activity Facility Supervisor		Employer (See Instructions) First Baptist Church-Abilene, TX
Date 08/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baisden, Sherry	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Abilene, TX 79601	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Distinction Jewelry
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bean, Vanilla	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Abilene, TX 79606	
Principal occupation / Job title (See Instructions) Network Analyst		Employer (See Instructions) Hendrick Medical Center
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boatright, Bryan	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Sweetwater, TX 79556	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/20 Rpt: 5/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 09/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolte, Megan <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79602	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Secretary		9 Employer (See Instructions) Hardin Simmons University
Date 11/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, David (Mr.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Hotelier		Employer (See Instructions) Nansad Hospitality
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britt, Monika (Ms.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79606	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Mandy <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Emerald Agency
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Kendra <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Customer Service		Employer (See Instructions) Blue Cross Blue Shield

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/20 Rpt: 6/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 10/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cannedy, Sharon <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79602-5100	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantu, Brittney <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carson, Rebecca <hr/> Contributor address; City; State; Zip Code Abilene, TX 79606	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 12/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Kristy (Ms.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605	Amount of Contribution (\$) \$389.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 10/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cooper, Brittany <hr/> Contributor address; City; State; Zip Code Canton, GA 30114	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/20 Rpt: 7/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 08/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowe, Timothy (Mr.)	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Abilene, TX 79602	
8 Principal occupation / Job title (See Instructions) Bookkeeper		9 Employer (See Instructions) The Crowe Company
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danilowski, Justina (Ms.)	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Abilene, TX 79605	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davidson, Ava	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Abilene, TX 79603	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillman, David (Mr.)	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Abilene, TX 79601	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) None
Date 09/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorsey, Donna	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Abilene, TX 79605	
Principal occupation / Job title (See Instructions) NOt Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/20 Rpt: 8/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 10/16/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Escamilla, Emily <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79603	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Cashier		9 Employer (See Instructions) Trinity Vaping Lounge
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franco, Adonois <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Loadmaster		Employer (See Instructions) U. S. Air Force
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Janeen <hr/> Contributor address; City; State; Zip Code Abilene, TX 79603	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Nursing		Employer (See Instructions) SLP
Date 09/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Futrelle, Lisa <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Pest Control		Employer (See Instructions) Pest Authority
Date 08/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Amanda (Ms.) <hr/> Contributor address; City; State; Zip Code Merkel, TX 79536	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Letter Carrier		Employer (See Instructions) USPS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/20 Rpt: 9/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 10/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Sammy (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79603	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Insurance Sales		9 Employer (See Instructions) Self Employed
Date 11/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goolsbee, Linda (Mrs.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79606	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graff, Matthew <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Morsco
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Jordan <hr/> Contributor address; City; State; Zip Code Abilene, TX 79606	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Customer Service Manager		Employer (See Instructions) Vexus Fiber
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Rosemary <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Graphic Designer		Employer (See Instructions) Abilene Christian University

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/20 Rpt: 10/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 08/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hattan, Sam (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79603	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Web Designer		9 Employer (See Instructions) Self
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hauger, Misti <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Human Resources		Employer (See Instructions) Dyess AFB
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heady, Martha <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Debbie <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Librarian		Employer (See Instructions) City of ?Abilene
Date 09/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoffmann, Chelsie <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/20 Rpt: 11/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 09/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogan, Dave	7 Amount of Contribution (\$) \$15.00
	6 Contributor address; City; State; Zip Code Grand Island, FL 32735	
8 Principal occupation / Job title (See Instructions) Non-Profit Fundraiser		9 Employer (See Instructions) Mount Dora Children's Home
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingram, David	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Abilene, TX 79602	
Principal occupation / Job title (See Instructions) Asst. Manager		Employer (See Instructions) Texas Star Trading Company
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ives, Brenda (Ms.)	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Abilene, TX 79605	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Arleta (Mrs.)	Amount of Contribution (\$) \$120.00
	Contributor address; City; State; Zip Code Abilene, TX 79606	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Blake	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Abilene, TX 79606	
Principal occupation / Job title (See Instructions) Hospital Sterilization Processing		Employer (See Instructions) Hendrick Medical Center

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/20 Rpt: 12/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 09/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Judy, David <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79605	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kauffmann, Brandi <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Abilene ISD
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Kelvin <hr/> Contributor address; City; State; Zip Code Abilene, TX 79603	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) Hardin-Simmons University
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kingston, Kiran <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Information Services		Employer (See Instructions) Hendrick Medical Center
Date 08/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirkpatrick, Morgan <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Marketing Coordinator		Employer (See Instructions) R2M Engineering

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/20 Rpt: 13/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knox, Ed & Cindy (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79602	7 Amount of Contribution (\$) \$160.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) NONE
Date 08/21/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaRue J.D., Patricia <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) McMahon Surovik Suttle PC
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaRue J.D., Patricia <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) McMahon Surovik Suttle PC
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leverett, Callie <hr/> Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 07/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Goolsbee TX for State Representative <hr/> Contributor address; City; State; Zip Code Abilene, TX 79608-5108	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/20 Rpt: 14/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 11/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda Goolsbee for TX State Representative for	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Abilene, TX 79608-5108		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Logan, Alissa	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Hawley, TX 79525		
Principal occupation / Job title (See Instructions) Service Worker		Employer (See Instructions) Delek
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Alma	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Abilene, TX 79603		
Principal occupation / Job title (See Instructions) Design Director		Employer (See Instructions) MG West
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loza, Kelsey	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Abilene, TX 79602		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 08/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Jalmar	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Abilene, TX 79606		
Principal occupation / Job title (See Instructions) Clerk		Employer (See Instructions) USPS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/20 Rpt: 15/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 10/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Jennifer	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Abilene, TX 79606	
8 Principal occupation / Job title (See Instructions) Entertainer		9 Employer (See Instructions) Cloud 9
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maduka M.D., Sobie	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Abilene, TX 79606	
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) Hendrick Medical Center
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathis, Anna-Kate	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Abilene, TX 79605	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Southwind Group
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Katie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Abilene, TX 79601	
Principal occupation / Job title (See Instructions) Filmmaker		Employer (See Instructions) Abilene Christian University
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Sherry	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Abilene, TX 79605	
Principal occupation / Job title (See Instructions) Lobby /attendant		Employer (See Instructions) McDonald's

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/20 Rpt: 16/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 09/12/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKnight, Sara <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79605	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Business Manager		9 Employer (See Instructions) Paramount Theater
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moak, Corrie <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Medical Records Clerk		Employer (See Instructions) West Texas Rehabilitation Center
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Eachel <hr/> Contributor address; City; State; Zip Code Abilene, TX 79606	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Abilene Christian University
Date 09/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morin, Cecilia <hr/> Contributor address; City; State; Zip Code Abilene, TX 79603	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Public /defender		Employer (See Instructions) Concho Valley Public Defender's Ofcf
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munoz, Analycia <hr/> Contributor address; City; State; Zip Code Abilene, TX 79603	Amount of Contribution (\$) \$2.00
Principal occupation / Job title (See Instructions) Juvenile Probation Officer		Employer (See Instructions) Taylor County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/20 Rpt: 17/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 10/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neal J.D., Mark <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79605	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Milsoft
Date 09/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parrish, Andrea (Ambassador) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Pharmacy Tech		Employer (See Instructions) Hendrick Medical Center
Date 09/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Periman, Billy <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Fiber Technician		Employer (See Instructions) Vexus
Date 12/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Linda (Mrs.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$430.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pierce, Anne <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/20 Rpt: 18/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 09/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinson, Christine	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Abilene, TX 79601		
8 Principal occupation / Job title (See Instructions) Owner Hay Sugar		9 Employer (See Instructions) Self
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, JULie (Ms.)	Amount of Contribution (\$) \$15.00
Contributor address; City; State; Zip Code Abilene, TX 79605		
Principal occupation / Job title (See Instructions) Specialist		Employer (See Instructions) Steritech
Date 09/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Sheryl (Ms.)	Amount of Contribution (\$) \$145.00
Contributor address; City; State; Zip Code Abilene, TX 79601		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) NONE
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Kristen	Amount of Contribution (\$) \$55.00
Contributor address; City; State; Zip Code Abilene, TX 79601		
Principal occupation / Job title (See Instructions) Counselor		Employer (See Instructions) Abilene Christian University
Date 09/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Katy	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Abilene, TX 79606		
Principal occupation / Job title (See Instructions) Salesperson		Employer (See Instructions) Mister Car Wash

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/20 Rpt: 19/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 09/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Jen (Ms.)	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Abilene, TX 79602	
8 Principal occupation / Job title (See Instructions) Humanitarian		9 Employer (See Instructions) International Rescue Commission
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, Theresa (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Abilene, TX 79606-5769	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Abilene Teachers Federal Credit Union
Date 12/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Donna (Mrs.)	Amount of Contribution (\$) \$625.00
	Contributor address; City; State; Zip Code Abilene, TX 79602	
Principal occupation / Job title (See Instructions) Financial Manager		Employer (See Instructions) Day Nursery of Abilene
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sartor, Kelley	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Abilene, TX 79602	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Alice	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Abilene, GA 79603	
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/20 Rpt: 20/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 09/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spano, Teddie (Mrs.) <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79606	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 08/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stockton, David (Mr.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tellez, Lori <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Contract Manager		Employer (See Instructions) Dept
Date 08/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomesen, Janet (Ms.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tiner, Kathleen <hr/> Contributor address; City; State; Zip Code Abilene, TX 79603	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/20 Rpt: 21/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toombs, Freddy & Kay	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Merkel, TX 79536		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) None
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toombs, Freddy & Kay	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Merkel, TX 79536		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) None
Date 09/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toombs, Freddy & Kay	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Merkel, TX 79536		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) None
Date 08/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Udaeta, Victor	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Abilene, TX 79602		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Target
Date 12/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanderhider, Frances (Ms.)	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Abilene, TX 79606		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/20 Rpt: 22/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 08/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vinson, Ed & Sonya	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Snyder, TX 79549		
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) N/A
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Volcko, Angela	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Hawley, TX 79536		
Principal occupation / Job title (See Instructions) Sandwich Artist		Employer (See Instructions) Subway
Date 09/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Volk, Andrea	Amount of Contribution (\$) \$5.00
Contributor address; City; State; Zip Code Abilene, TX 79605		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A
Date 09/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waldrop, Denise	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Abilene, TX 79602		
Principal occupation / Job title (See Instructions) Administrator		Employer (See Instructions) Abilene Christian University
Date 08/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson J.D., Tom (Mr.)	Amount of Contribution (\$) \$410.00
Contributor address; City; State; Zip Code Abilene, TX 79602		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mehaffey & Watson

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/20 Rpt: 23/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 09/07/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Mary McKenzie <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78736	7 Amount of Contribution (\$) <div style="text-align: right;">\$15.00</div>
8 Principal occupation / Job title (See Instructions) Student/Nanny		9 Employer (See Instructions) Parents of the children
Date 08/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittemore, Maria (Ms.) <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) <div style="text-align: right;">\$20.00</div>
Principal occupation / Job title (See Instructions) Message Therapist		Employer (See Instructions) The Medspa at Hendrick
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Jana <hr/> Contributor address; City; State; Zip Code Abilene, TX 79601	Amount of Contribution (\$) <div style="text-align: right;">\$25.00</div>
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) Self-Employed
Date 10/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Robert <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) <div style="text-align: right;">\$10.00</div>
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) N/A

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 24/39	
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 08/25/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Sammy (Mr.)	8 Amount of contribution (\$) \$375.00	9 In-kind contribution description Food & serving supplies for Party event "Festival at the Park"
	7 Contributor address; City; State; Zip Code Abilene, TX 79603	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Insurance Sales		11 Employer (FOR NON-JUDICIAL) (See instructions) Self Employed	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

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: 1/14 Rpt: 25/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
4 Date 07/22/2024	5 Payee name AT&T Mobility	
6 Amount (\$) \$68.84	7 Payee address; City; State; Zip Code PO Box 6463 Carol Stream, IL 60197-6463	
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 Mobile phone service for Party phone
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/21/2024	Payee name AT&T Mobility	
Amount (\$) \$68.86	Payee address; City; State; Zip Code PO Box 6463 Carol Stream, IL 60197-6463	
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 bill for Party telephone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2024	Payee name AT&T Mobility	
Amount (\$) \$68.84	Payee address; City; State; Zip Code PO Box 6463 Carol Stream, IL 60197-6463	
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 charge for Party telephone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 2/14 Rpt: 26/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
4	Date 10/25/2024	5 Payee name AT&T Mobility	
6	Amount (\$) \$68.84	7 Payee address; City; State; Zip Code PO Box 6463 Carol Stream, IL 60197-6463	
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 charge for Party Headquarters telephone.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 11/21/2024	Payee name AT&T Mobility	
	Amount (\$) \$68.86	Payee address; City; State; Zip Code PO Box 6463 Carol Stream, IL 60197-6463	
	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 charge for Party telephone
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 12/23/2024	Payee name AT&T Mobility	
	Amount (\$) \$68.86	Payee address; City; State; Zip Code PO Box 6463 Carol Stream, IL 60197-6463	
	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 charge for Party telephone
	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: 3/14 Rpt: 27/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
4 Date 12/23/2024	5 Payee name ActBlue	
6 Amount (\$) \$187.10	7 Payee address; City; State; Zip Code P O Box 441146 Somerville, MA 02144	
8 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 Fees charged on ActBlue contributions
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2024	Payee name Amazon	
Amount (\$) \$44.29	Payee address; City; State; Zip Code WA	
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 Bumper Stickers for sale
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/19/2024	Payee name Amazon	
Amount (\$) \$44.25	Payee address; City; State; Zip Code WA	
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 Bumper stickers for sale
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: 4/14 Rpt: 28/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
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4 Date 10/28/2024	5 Payee name Dollar General
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6 Amount (\$) \$14.28	7 Payee address; City; State; Zip Code 630 S Leggett Drive Abilene, TX 79605
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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 Mini sodas for volunteers staffing Headquarters providing information & Campaign materials
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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 FEDEX-KINKO'S
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Amount (\$) \$27.33	Payee address; City; State; Zip Code 4133 S. Danille Drive. Abilene, TX 79605
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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 Copying handout materials for Party booth at West Texas Fair & Rodeo
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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 07/03/2024	Payee name FL20, Inc
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Amount (\$) \$831.86	Payee address; City; State; Zip Code 4633 S. 14TH ST. Abilene, TX 79605
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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 Rent
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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: 5/14 Rpt: 29/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
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4 Date 07/16/2024	5 Payee name FL20, Inc
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6 Amount (\$) \$120.00	7 Payee address; City; State; Zip Code 4633 S. 14TH ST. Abilene, TX 79605
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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 Office Utilities
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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 08/02/2024	Payee name FL20, Inc
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Amount (\$) \$831.86	Payee address; City; State; Zip Code 4633 S. 14TH ST. Abilene, TX 79605
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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 Rent for Party Headquarters office
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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 08/02/2024	Payee name FL20, Inc
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Amount (\$) \$191.36	Payee address; City; State; Zip Code 4633 S. 14TH ST. Abilene, TX 79605
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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 Utilities for Party Headquarters office
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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: 6/14 Rpt: 30/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
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4 Date 09/11/2024	5 Payee name FL20, Inc
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6 Amount (\$) \$831.86	7 Payee address; City; State; Zip Code 4633 S. 14TH ST. Abilene, TX 79605
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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 rent for Party Headquarters office
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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 09/11/2024	Payee name FL20, Inc
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Amount (\$) \$239.49	Payee address; City; State; Zip Code 4633 S. 14TH ST. Abilene, TX 79605
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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 Utilities for Party Headquarters office
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/03/2024	Payee name FL20, Inc
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Amount (\$) \$831.86	Payee address; City; State; Zip Code 4633 S. 14TH ST. Abilene, TX 79605
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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 Rent for Party Headquarters office
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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: 7/14 Rpt: 31/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
4	Date 10/03/2024	5 Payee name FL20, Inc	
6	Amount (\$) \$192.69	7 Payee address; City; State; Zip Code 4633 S. 14TH ST. Abilene, TX 79605	
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 Utilities for Party Headquarters
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 11/04/2024	Payee name FL20, Inc	
	Amount (\$) \$831.86	Payee address; City; State; Zip Code 4633 S. 14TH ST. Abilene, TX 79605	
	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 Rent for Party Headquarters office
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 11/04/2024	Payee name FL20, Inc	
	Amount (\$) \$153.28	Payee address; City; State; Zip Code 4633 S. 14TH ST. Abilene, TX 79605	
	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 Utilities for Party Headquarters office
	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: 8/14 Rpt: 32/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
4	Date 12/04/2024	5 Payee name FL20, Inc	
6	Amount (\$) \$831.86	7 Payee address; City; State; Zip Code 4633 S. 14TH ST. Abilene, TX 79605	
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 Rent for Party Headquarters Office
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 FL20, Inc	
	Amount (\$) \$153.56	Payee address; City; State; Zip Code 4633 S. 14TH ST. Abilene, TX 79605	
	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 Utilities for Party Headquarters office
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
	Date 11/06/2024	Payee name Garcia, Samuel (Mr.)	
	Amount (\$) \$839.64	Payee address; City; State; Zip Code 401 N. Willis St Abilene, TX 79603	
	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 Rental for facilities @ Hilton Garden Inn for Election night Watch Party
	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: 9/14 Rpt: 33/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
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4 Date 08/14/2024	5 Payee name Hatton, Sam
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6 Amount (\$) \$95.00	7 Payee address; City; State; Zip Code 709 Woodlawn Drive Abilene, TX 79603
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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 Websight Maintenance
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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 09/12/2024	Payee name Logan's Roadhouse
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Amount (\$) \$100.01	Payee address; City; State; Zip Code 3126 Clack ST Abilene, TX 79606
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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 National candidate debate watch party.
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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 07/19/2024	Payee name OPTIMUM
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Amount (\$) \$120.03	Payee address; City; State; Zip Code 3558 S. Clack Street Abilene, TX 79606
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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 Wifi for Party Headquarters office
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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: 10/14 Rpt: 34/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
4 Date 08/19/2024	5 Payee name OPTIMUM	
6 Amount (\$) \$180.45	7 Payee address; City; State; Zip Code 3558 S. Clack Street Abilene, TX 79606	
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 Wifi for Party Headquarters office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/19/2024	Payee name OPTIMUM	
Amount (\$) \$120.45	Payee address; City; State; Zip Code 3558 S. Clack Street Abilene, TX 79606	
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 Wi-Fi for Party Headquarters office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/21/2024	Payee name OPTIMUM	
Amount (\$) \$34.32	Payee address; City; State; Zip Code 3558 S. Clack Street Abilene, TX 79606	
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 Wi-Fi for Party Headquarters office
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: 11/14 Rpt: 35/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
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4 Date 11/19/2024	5 Payee name OPTIMUM
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6 Amount (\$) \$97.73	7 Payee address; City; State; Zip Code 3558 S. Clack Street Abilene, TX 79606
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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 Wi-Fi for Party Headquarters office
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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 OPTIMUM
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Amount (\$) \$97.73	Payee address; City; State; Zip Code 3558 S. Clack Street Abilene, TX 79606
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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 Wi-Fi for Party Headquarters office
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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 11/05/2024	Payee name Papa John's Pizza
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Amount (\$) \$16.64	Payee address; City; State; Zip Code 3900 N. 1st St. Abilene, TX 79601
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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 Pizza for Election night Watch Party
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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: 12/14 Rpt: 36/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
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4 Date 11/06/2024	5 Payee name Party City
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6 Amount (\$) \$30.30	7 Payee address; City; State; Zip Code 3536 S Clack St Abilene, TX 79606
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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 Decorations, paper plates, plastic cutlery, napkins, etc for election night Watch Party
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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 10/20/2024	Payee name Perkins, Linda (Mrs.)
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Amount (\$) \$243.11	Payee address; City; State; Zip Code 2341Christopher Abilene, TX 79602
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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 Reimburse for supplies used in West Texas Fair & Rodeo Booth
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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 12/16/2024	Payee name US Postal Service
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Amount (\$) \$302.00	Payee address; City; State; Zip Code 2501 Buffalo Gap Road Abilene, TX 79605
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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 Annual fee for Party Post Office Box
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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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/14 Rpt: 37/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
4 Date 07/19/2024	5 Payee name USPS	
6 Amount (\$) \$17.00	7 Payee address; City; State; Zip Code 2501 Buffalo Gap Rd Abilene, TX 79608	
8 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 Key for Party PO Box for new chairperson
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/15/2024	Payee name Wal*Mart	
Amount (\$) \$7.11	Payee address; City; State; Zip Code 4350 Southwest Drive Abilene, TX 79605	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Coffee for Party Headquarters staffers working in office providing information & campaign signs
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/01/2024	Payee name Zoom	
Amount (\$) \$16.79	Payee address; City; State; Zip Code 55 Almaden Blvd Suite 600 San Jose, CA 95133	
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 Zoom subscription for CEC meetings
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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/14 Rpt: 38/39	2 FILER NAME Taylor County Democratic PAC (CEC)	3 Filer ID (Ethics Commission Filers) 00016594
4 Date 08/01/2024	5 Payee name Zoom	
6 Amount (\$) \$16.79	7 Payee address; City; State; Zip Code 55 Almaden Blvd Suite 600 San Jose, CA 95133	
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 Zoom subscriptions for monthly CEC meetings
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 39/39
2 FILER NAME Taylor County Democratic PAC (CEC)		3 Filer ID (Ethics Commission Filers) 00016594
4 Date 12/28/2024	5 Name of person from whom amount is received TX Secretary of State	8 Amount (\$) \$1,385.57
	6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78701	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Reimbursement for laptop computer used in conducting Party Primary Elections business.	