#### 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) 00082986 3 COMMITTEE NAME **OFFICE USE ONLY** Southeast Texas Democratic Women Date Received **ELECTRONICALLY FILED** 01/15/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1900 Broadway Date Hand-delivered or Date Postmarked Change of Address Beaumont, TX 77701 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Mary E. NAME NICKNAME LAST **SUFFIX** Kirkwood STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 984 Sun Meadow STREET **ADDRESS** (Residence or Business) Beaumont, TX 77706 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 984 Sun Meadow MAILING **ADDRESS** Beaumont, TX 77706 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 806-4122 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** 07/01/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special **GO TO PAGE 2**

#### GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

| 2 COMMITTEE NAME  |  | 13 Filer ID (Ethics Commission Filers)   |                 |                        |
|---|--|--|-----------------|------------------------|
| Southeast Texas Democratic Women                                    |  | 00082986   |                 |                        |
| 14 COMMITTEE<br>ACTIVITY  | 1. Candidates<br>(Identify by name or, if<br>applicable, classify by party.)       | A. Supported   |                 |                        |
| (Attach lists on plain paper to complete this report if necessary.) |  | B. Opposed   |                 |                        |
|   | 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<br>TOTALS   | PLEDGES, LOANS, CONTRIBUTIONS M  × check here if this report                       | D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold | \$              | 908.41                 |
|   | 2. TOTAL POLITICA (OTHER THAN PLE  | L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)   | \$              | 908.41                 |
| EXPENDITURE<br>TOTALS   | 3. TOTAL UNITEMIZED  | POLITICAL EXPENDITURES   | \$              | 0.00                   |
|   | 4. TOTAL POLITICA  | L EXPENDITURES   | \$              | 0.00                   |
| CONTRIBUTION<br>BALANCE   | 5. TOTAL POLITICAL (<br>OF THE REPORTIN  | CONTRIBUTIONS MAINTAINED AS OF THE LAST<br>G PERIOD  | DAY \$          | 14,696.07              |
| OUTSTANDING<br>LOAN TOTALS  | •  | AMOUNT OF ALL OUTSTANDING LOANS AS OF T<br>REPORTING PERIOD  | THE \$          | 0.00                   |
| 16 AFFIDAVIT  | <u>'</u>   |  | <u>'</u>        |                        |
|   |  | I swear, or affirm, under penalty of pe<br>true and correct and includes all informunder Title 15, Election Code.                    |                 |                        |
|   |  | Ms. Mary E   | E. Kirkwood     |                        |
|   |  | Signature of Car   | mpaign Treasເ   | ırer                   |
| AFFIX NOTARY  | STAMP / SEAL ABOVE   |  |                 |                        |
|   |  | , th   | nis the         | day                    |
| of  | _, 20, to certify v  | which, witness my hand and seal of office.   |                 |                        |
| Signature of officer ad   | ministering oath   | Printed name of officer administering oath   | Title of office | cer administering oath |

#### **SUBTOTALS - GPAC**

# FORM GPAC COVER SHEET PG 3

|  |  |                |              | 3 of 9          |
|--|--|----------------|--------------|-----------------|
| 17 COMMIT  | EE NAME  | 18 Filer ID    | (Ethics Comr | mission Filers) |
| Southe   | Southeast Texas Democratic Women 00082986                                      |                |              |                 |
| 19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE                              |  |                |              | TAL AMOUNT      |
| 1. X   | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                  |                | \$           | 908.41          |
| 2.   | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                    |                | \$           |                 |
| 3.   | SCHEDULE B: PLEDGED CONTRIBUTIONS  |                | \$           |                 |
| 4.   | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LA ORGANIZATION        | BOR            | \$           |                 |
| 5.   | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPOLABOR ORGANIZATION | RATION OR      | \$           |                 |
| 6.   | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR OF                     | RGANIZATION    | \$           |                 |
| 7.   | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABO<br>ORGANIZATION     | OR .           | \$           |                 |
| 8.   | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABO                     | R ORGANIZATION | \$           |                 |
| 9.   | SCHEDULE E: LOANS  |                | \$           |                 |
| 10. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS |  |                | \$           |                 |
| 11.  | 11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                   |                |              |                 |
| 12.  | 12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS          |                |              |                 |
| 13.  | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                  |                | \$           |                 |
| 14. X  | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBU                 | TIONS          | \$           | 2,333.96        |
| 15.  | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION TO FILER       | S RETURNED     | \$           |                 |
|  |  |                |              |                 |

| The Instruction Guide explains how to complete this form. |   |  |  |
|---|---|--|--|
| 1 Total pages Schedule I:                                 | 2 FILER NAME  | 3 Filer ID (Ethics Commission Filers)                                      |  |
| Sch: 1/6 Rpt: 4/9   | Southeast Texas Democratic Women  | 00082986   |  |
| 4 Date  | 5 Payee name  |  |  |
| 07/16/2024  | Debb's Liquor   |  |  |
| 6 Amount (\$)   | 7 Payee Address; City; State; Zip   |  |  |
| 62.79   | 2525 College  |  |  |
| Expenditure from corporate funds                          | Beaumont, TX 77701  |  |  |
| 8 PURPOSE   | (a) Category (See instructions for examples of acceptable categories)                       | ·  |  |
| OF<br>EXPENDITURE   | Food/Beverage Expense   | Sandwich tray  |  |
|   |   |  |  |
| Data  | Dougo nama  |  |  |
| Date<br>09/11/2024  | Payee name  |  |  |
|   | Debb's Liquor   |  |  |
| Amount (\$)   | Payee Address; City; State; Zip   |  |  |
| 65.51   | 2525 College  |  |  |
| Expenditure from  | Beaumont, TX 77701  |  |  |
| corporate funds   |   | (I)  |  |
| PURPOSE<br>OF   | (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense | (b) Description (See instructions regarding type of information required.) |  |
| EXPENDITURE   | FOOU/Beverage Expense   | Sandwich tray  |  |
|   |   |  |  |
| Date  | Payee name  |  |  |
| 10/18/2024  | Debb's Liquor   |  |  |
| Amount (\$)   | Payee Address; City; State; Zip   |  |  |
| 91.15   | 2525 College  |  |  |
| Expenditure from  |   |  |  |
| corporate funds   | Beaumont, TX 77701  |  |  |
| PURPOSE   | (a) Category (See instructions for examples of acceptable categories)                       | •  |  |
| OF<br>EXPENDITURE   | Food/Beverage Expense   | Sandwich tray  |  |
|   |   |  |  |
| Date  | Payee name  |  |  |
| 12/06/2024  | Dollar Tree   |  |  |
|   |   |  |  |
| Amount (\$)   | Payee Address; City; State; Zip   |  |  |
| 32.48   | Stagg Dr  |  |  |
| Expenditure from corporate funds                          | Beaumont, TX 77701  |  |  |
| PURPOSE   | (a) Category (See instructions for examples of acceptable categories)                       |  |  |
| OF<br>EXPENDITURE   | Event Expense   | tablecloths, plates, napkins   |  |
|   |   |  |  |
|   |   |  |  |
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| The Instruction Guide explains how to complete this form. |   |  |  |
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| 1 Total pages Schedule I:                                 | 2 FILER NAME  | 3 Filer ID (Ethics Commission Filers)                                  |  |
| Sch: 2/6 Rpt: 5/9   | Southeast Texas Democratic Women  | 00082986   |  |
| 4 Date  | 5 Payee name  | •  |  |
| 12/09/2024  | Dollar Tree   |  |  |
| 6 Amount (\$)   | 7 Payee Address; City; State; Zip   |  |  |
| 13.53   | Stagg Dr  |  |  |
| Expenditure from  |   |  |  |
| corporate funds   | Beaumont, TX 77701  |  |  |
| 8 PURPOSE   | (a) Category (See instructions for examples of acceptable categories) (b) | ·  |  |
| OF<br>EXPENDITURE   | Event Expense   | decorations  |  |
|   |   |  |  |
| Dete  | Davis and   |  |  |
| Date<br>12/10/2024  | Payee name Dollar Tree  |  |  |
|   |   |  |  |
| Amount (\$)   | Payee Address; City; State; Zip   |  |  |
| 12.18   | Stagg Dr  |  |  |
| Expenditure from corporate funds                          | Beaumont, TX 77701  |  |  |
| PURPOSE   | (a) Category (See instructions for examples of acceptable categories) (b) | Description (See instructions regarding type of information required.) |  |
| OF  | Event Expense   | snacks, table cloths   |  |
| EXPENDITURE   |   | Silacito, table diotilo  |  |
|   |   |  |  |
| Date  | Payee name  |  |  |
| 12/10/2024  | Dollar Tree   |  |  |
| Amount (\$)   | Payee Address; City; State; Zip   |  |  |
| 17.59   | Stagg Dr  |  |  |
| Expenditure from  |   |  |  |
| corporate funds   | Beaumont, TX 77701  |  |  |
| PURPOSE   | (a) Category (See instructions for examples of acceptable categories) (b) | •  |  |
| OF<br>EXPENDITURE   | Event Expense   | utensils   |  |
|   |   |  |  |
| Dete  | Power rooms   |  |  |
| Date<br>08/14/2024  | Payee name Domino's Pizza   |  |  |
|   |   |  |  |
| Amount (\$)   | Payee Address; City; State; Zip   |  |  |
| 109.81  | 6755 Phelan   |  |  |
| Expenditure from  | Beaumont , TX 77706   |  |  |
| corporate funds  PURPOSE                                  | (a) Category (See instructions for examples of acceptable categories) (b) | Description (See instructions regarding type of information required.) |  |
| OF  | Food/Beverage Expense   | Food August meeting  |  |
| EXPENDITURE   |   | Tood / tagast mooting  |  |
|   |   |  |  |
|   |   |  |  |
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| The Instruction Guide explains how to complete this form. |   |  |  |
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| 1 Total pages Schedule I:                                 | 2 FILER NAME  | 3 Filer ID (Ethics Commission Filers)                                      |  |
| Sch: 3/6 Rpt: 6/9   | Southeast Texas Democratic Women                                      | 00082986   |  |
| 4 Date  | 5 Payee name  |  |  |
| 10/07/2024  | Dunkin Donuts   |  |  |
| 6 Amount (\$)   | 7 Payee Address; City; State; Zip                                     |  |  |
| 59.69   | 920 11th Street   |  |  |
| Expenditure from  |   |  |  |
| corporate funds   | Beaumont, TX 77702  |  |  |
| 8 PURPOSE<br>OF   | (a) Category (See instructions for examples of acceptable categories) | ·  |  |
| EXPENDITURE   | Food/Beverage Expense   | Donuts for block walk  |  |
|   |   |  |  |
| Date  | Payee name  |  |  |
| 07/10/2024  | Kroger  |  |  |
| Amount (\$)   | Payee Address; City; State; Zip                                       |  |  |
| 107.07  | 3845 phelan   |  |  |
| Expenditure from  | ·   |  |  |
| corporate funds   | Beaumont, TX 77706  |  |  |
| PURPOSE   | (a) Category (See instructions for examples of acceptable categories) | (b) Description (See instructions regarding type of information required.) |  |
| OF<br>EXPENDITURE   | Food/Beverage Expense   | Food July meeting  |  |
|   |   |  |  |
|   |   |  |  |
| Date  | Payee name  |  |  |
| 09/10/2024  | Kroger  |  |  |
| Amount (\$)   | Payee Address; City; State; Zip                                       |  |  |
| 96.65   | 3845 phelan   |  |  |
| Expenditure from corporate funds                          | Beaumont, TX 77706  |  |  |
| PURPOSE   | (a) Category (See instructions for examples of acceptable categories) | (b) Description (See instructions regarding type of information required.) |  |
| OF  | Food/Beverage Expense   | food for meeting   |  |
| EXPENDITURE   |   |  |  |
|   |   |  |  |
| Date  | Payee name  |  |  |
| 10/09/2024  | Kroger  |  |  |
| Amount (\$)   | Payee Address; City; State; Zip                                       |  |  |
| 24.83   | 3845 phelan   |  |  |
| Expenditure from  |   |  |  |
| corporate funds   | Beaumont, TX 77706  |  |  |
| PURPOSE   | (a) Category (See instructions for examples of acceptable categories) | ·  |  |
| OF<br>EXPENDITURE   | Food/Beverage Expense   | Cookies & napkins  |  |
|   |   |  |  |
|   |   |  |  |
|   |   |  |  |
|   |   |  |  |
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| The Instruction Guide explains how to complete this form. |  |  |  |
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| 1 Total pages Schedule I:                                 | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)   |  |  |
| Sch: 4/6 Rpt: 7/9   | Southeast Texas Democratic Women 00082986  |  |  |
| 4 Date  | 5 Payee name   |  |  |
| 12/10/2024  | Kroger   |  |  |
| 6 Amount (\$)   | 7 Payee Address; City; State; Zip  |  |  |
| 94.74   | 3845 phelan  |  |  |
| Expenditure from corporate funds                          | Beaumont, TX 77706   |  |  |
| 8 PURPOSE   | (a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.) |  |  |
| OF  | Food/Beverage Expense food & beverages for December meeting  |  |  |
| EXPENDITURE   |  |  |  |
|   |  |  |  |
| Date  | Payee name   |  |  |
| 12/10/2024  | Lowe's   |  |  |
| Amount (\$)   | Payee Address; City; State; Zip  |  |  |
| 64.63   | 4120 Dowlen Road   |  |  |
| Expenditure from  |  |  |  |
| corporate funds   | Beaumont, TX 77706   |  |  |
| PURPOSE   | (a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.) |  |  |
| OF<br>EXPENDITURE   | Event Expense Poinsettias  |  |  |
|   |  |  |  |
|   |  |  |  |
| Date  | Payee name   |  |  |
| 10/17/2024  | Makin, Lynda Kay (Mrs.)  |  |  |
| Amount (\$)   | Payee Address; City; State; Zip  |  |  |
| 170.87  | 2490 Ashley  |  |  |
| Expenditure from corporate funds                          | Beaumont, TX 77702   |  |  |
| PURPOSE   | (a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.) |  |  |
| OF  | Food/Beverage Expense hot dogs & drinks  |  |  |
| EXPENDITURE   | I not dogo a animo   |  |  |
|   |  |  |  |
| Date  | Payee name   |  |  |
| 11/18/2024  | Ross   |  |  |
| Amount (\$)   | Payee Address; City; State; Zip  |  |  |
| 65.88   | 4019 Dowlen  |  |  |
| Expenditure from  |  |  |  |
| corporate funds   | Beaumont, TX 77706   |  |  |
| PURPOSE   | (a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.) |  |  |
| OF<br>EXPENDITURE   | Gift/Awards/Memorials Expense Door prizes for December meeting   |  |  |
|   |  |  |  |
|   |  |  |  |
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|                                  | The Instruction Guide explains how to   | complete this form.  |
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| 1 Total pages Schedule I:        | 2 FILER NAME  | 3 Filer ID (Ethics Commission Filers)  |
| Sch: 5/6 Rpt: 8/9                | Southeast Texas Democratic Women  | 00082986   |
| 4 Date                           | 5 Payee name  |  |
| 09/06/2024                       | Starbucks   |  |
| 6 Amount (\$)                    | 7 Payee Address; City; State; Zip   |  |
| 200.00                           | 3695 Dowlen   |  |
| Expenditure from corporate funds | Beaumont, TX 77706  |  |
| 8 PURPOSE                        | (a) Category (See instructions for examples of acceptable categories)                       | · ·  |
| OF<br>EXPENDITURE                | Gift/Awards/Memorials Expense   | Giftcards  |
|                                  |   |  |
| Date                             | Payee name  |  |
| 10/29/2024                       | Tacos La Bamba  |  |
| Amount (\$)                      | Payee Address; City; State; Zip   |  |
| 140.00                           | 2005 Calder   |  |
| Expenditure from                 | Posument TV 77701   |  |
| corporate funds                  | Beaumont, TX 77701  | (Continue of the continue of t |
| PURPOSE<br>OF                    | (a) Category (See instructions for examples of acceptable categories) Food/Beverage Expense | (b) Description (See instructions regarding type of information required.) food for volunteers   |
| EXPENDITURE                      | 1 Courbeverage Expense  | lood for volunteers  |
|                                  |   |  |
| Date                             | Payee name  |  |
| 07/31/2024                       | Texas Democratic Women  |  |
| Amount (\$)                      | Payee Address; City; State; Zip   |  |
| 80.00                            | P. O. Box 397   |  |
| Expenditure from                 | Mississ TV 70570  |  |
| corporate funds                  | Mission , TX 78573  | <u> </u>   |
| PURPOSE<br>OF                    | (a) Category (See instructions for examples of acceptable categories) membership dues       | (b) Description (See instructions regarding type of information required.)  Membership dues  |
| EXPENDITURE                      | membership dues   | Membership dues  |
|                                  |   |  |
| Date                             | Payee name  |  |
| 10/10/2024                       | Texas Democratic Women  |  |
| Amount (\$)                      | Payee Address; City; State; Zip   |  |
| 80.00                            | P. O. Box 397   |  |
| Expenditure from                 |   |  |
| corporate funds                  | Mission , TX 78573  |  |
| PURPOSE<br>OF                    | (a) Category (See instructions for examples of acceptable categories)                       | l ·  |
| EXPENDITURE                      | Fees  | Membership Dues  |
|                                  |   |  |
|                                  | 1   |  |
|                                  |   |  |
|                                  |   |  |
|                                  |   | !  |

#### SCHEDULE |

|                                  | The Instruction Guide explains how to                                 | complete this form.  |
|----------------------------------|---|--|
| 1 Total pages Schedule I:        | 2 FILER NAME  | 3 Filer ID (Ethics Commission Filers)                                      |
| Sch: 6/6 Rpt: 9/9                | Southeast Texas Democratic Women                                      | 00082986   |
| 4 Date                           | 5 Payee name  |  |
| 10/10/2024                       | Texas Democratic Women  |  |
| 6 Amount (\$)                    | 7 Payee Address; City; State; Zip                                     |  |
| 130.00                           | P. O. Box 397   |  |
| Expenditure from corporate funds | Mission , TX 78573  |  |
| 8 PURPOSE                        |   | (b) Description (See instructions regarding type of information required.) |
| OF<br>EXPENDITURE                | Fees  | Membership Dues  |
|                                  |   |  |
| Date                             | Payee name  |  |
| 09/19/2024                       | The Examiner  |  |
| Amount (\$)                      | Payee Address; City; State; Zip                                       |  |
| 175.00                           | 795 Willow  |  |
| Expenditure from                 |   |  |
| corporate funds                  | Beaumont, TX 77701  |  |
| PURPOSE                          |   | (b) Description (See instructions regarding type of information required.) |
| OF<br>EXPENDITURE                | Advertising Expense   | Labor Day Ad   |
|                                  |   |  |
| Date                             | Payee name  |  |
| 10/16/2024                       | Threads   |  |
| Amount (\$)                      | Payee Address; City; State; Zip                                       |  |
|                                  | 7747 Twin City  |  |
| 243.56                           |   |  |
| Expenditure from corporate funds | Port Arthur, TX 77642   |  |
| PURPOSE                          | (a) Category (See instructions for examples of acceptable categories) | (b) Description (See instructions regarding type of information required.) |
| OF<br>EXPENDITURE                | t-shirts  | t-shirts   |
|                                  |   |  |
| Dete                             | Page 1999   |  |
| Date<br>10/16/2024               | Payee name U.S. Post Office   |  |
|                                  |   |  |
| Amount (\$)                      | Payee Address; City; State; Zip 300 Willow                            |  |
| 196.00                           | 300 Willow  |  |
| Expenditure from corporate funds | Beaumont , TX 77701   |  |
| PURPOSE                          | (a) Category (See instructions for examples of acceptable categories) | (b) Description (See instructions regarding type of information required.) |
| OF<br>EXPENDITURE                | Stamps  | postage  |
| EXI ENDITORE                     |   |  |
|                                  |   |  |
|                                  |   |  |
|                                  |   |  |
|                                  |   |  |