

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00016546	2 Total pages filed: 14
3 COMMITTEE NAME Texas Society of Architects Committee			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 03/04/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 500 Chicon St. Austin, TX 78702		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Jennifer B. NICKNAME LAST SUFFIX Briggs		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 500 Chicon St. Austin, TX 78702		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 500 Chicon St. Austin, TX 78702		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 478-7386		
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)		
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input checked="" type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5		
11 PERIOD COVERED	Month Day Year 01/26/2025 THROUGH Month Day Year 02/25/2025		

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Texas Society of Architects Committee	13 Filer ID (Ethics Commission Filers) 00016546
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,117.12
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 526.40
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 191,115.38
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.

Mrs. Jennifer B. Briggs

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 - MPAC**FORM MPAC**
COVER SHEET PG 3
3 of 14

17 COMMITTEE NAME Texas Society of Architects Committee		18 Filer ID (Ethics Commission Filers) 00016546
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,766.50
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 20.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input checked="" type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$ 5,330.62
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 526.40
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/7 Rpt: 4/14
2 FILER NAME Texas Society of Architects Committee		3 Filer ID (Ethics Commission Filers) 00016546
4 Date 02/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, James <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75204	7 Amount of Contribution (\$) \$55.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions)
Date 02/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Caitlyn <hr/> Contributor address; City; State; Zip Code Austin, TX 78756	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Government Affairs		Employer (See Instructions) Texas Society of Architects
Date 02/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alston, Norman <hr/> Contributor address; City; State; Zip Code Dallas, TX 75270	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 02/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aoki, Kate <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Basora, Zaida <hr/> Contributor address; City; State; Zip Code Grand Prairie, TX 75052	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/7 Rpt: 5/14
2 FILER NAME Texas Society of Architects Committee		3 Filer ID (Ethics Commission Filers) 00016546
4 Date 02/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandt, Nathan 6 Contributor address; City; State; Zip Code Bryan, TX 77802	7 Amount of Contribution (\$) \$13.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions)
Date 02/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brant, Charles Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 02/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brant, Elizabeth Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 02/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broughton, Derwin Contributor address; City; State; Zip Code Duncanville, TX 75116-2064	Amount of Contribution (\$) \$42.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 01/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buckley, Colin Contributor address; City; State; Zip Code Plano, TX 75025	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/7 Rpt: 6/14
2 FILER NAME Texas Society of Architects Committee		3 Filer ID (Ethics Commission Filers) 00016546
4 Date 02/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennehy, Paul <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75218-2700	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions)
Date 02/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Richard <hr/> Contributor address; City; State; Zip Code Abilene, TX 79605	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 02/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franz, John <hr/> Contributor address; City; State; Zip Code Forth Worth, TX 76109	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 02/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guidry, Corey <hr/> Contributor address; City; State; Zip Code Tyler, TX 75703	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 02/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haecker, Krystyn <hr/> Contributor address; City; State; Zip Code Bellaire, TX 77401	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/14
2 FILER NAME Texas Society of Architects Committee		3 Filer ID (Ethics Commission Filers) 00016546
4 Date 02/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hawkins, Andrew 6 Contributor address; City; State; Zip Code College Station, TX 77840	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions)
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henke, Donald Contributor address; City; State; Zip Code Anna, TX 75409	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Rojelio Contributor address; City; State; Zip Code Houston, TX 77007	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 01/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holliday, Ashton Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 02/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hornbuckle, Carr Contributor address; City; State; Zip Code San Antonio, TX 78201	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/14
2 FILER NAME Texas Society of Architects Committee		3 Filer ID (Ethics Commission Filers) 00016546
4 Date 01/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jimenez-Draper, Mitzi <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77077	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions)
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, James <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76112	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez, Robert <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 02/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin , Ryan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 02/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Jesse <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/14
2 FILER NAME Texas Society of Architects Committee		3 Filer ID (Ethics Commission Filers) 00016546
4 Date 02/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Motal, Stephi <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$44.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions)
Date 02/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborne, Tommy <hr/> Contributor address; City; State; Zip Code Justin, TX 76247	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 01/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Price, Elizabeth <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 01/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rigg, Daniel <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)
Date 02/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis , Richard <hr/> Contributor address; City; State; Zip Code Laredo, TX 78045	Amount of Contribution (\$) \$12.50
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/14
2 FILER NAME Texas Society of Architects Committee		3 Filer ID (Ethics Commission Filers) 00016546
4 Date 01/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tijerina, Leslie <hr/> 6 Contributor address; City; State; Zip Code College Station, TX 77840	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Architect		9 Employer (See Instructions)
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Rebecca <hr/> Contributor address; City; State; Zip Code Taylor, TX 76574	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Government Affairs		Employer (See Instructions) Texas Society of Architects
Date 02/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woehler, Katharine <hr/> Contributor address; City; State; Zip Code College Station, TX 77845	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions)

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE **C1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule C1:
Sch: 1/1 Rpt: 11/14

2 FILER NAME

Texas Society of Architects Committee

3 Filer ID (Ethics Commission Filers)
00016546

4 Date

02/02/2025

5 Corporation / Labor Organization name

KAI Enterprises

7 Amount of contribution (\$)

\$20.00

6 Corporation / Labor Organization address; City; State; Zip Code

Irving, TX 75039

NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE **C4**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule C4:
Sch: 1/1 Rpt: 12/14

2 FILER NAME

Texas Society of Architects Committee

3 Filer ID (Ethics Commission Filers)
00016546

4 Date

02/25/2025

5 Corporation / Labor Organization name

Texas Society of Architects

6 Amount (\$)

5,330.62

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: 1/2 Rpt: 13/14	2 FILER NAME Texas Society of Architects Committee	3 Filer ID (Ethics Commission Filers) 00016546
4 Date 01/31/2025	5 Payee name Authorize.Net	
6 Amount (\$) \$37.74	7 Payee address; City; State; Zip Code P.O. Box 8999 San Francisco, CA 94128	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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 Processing fees for online/credit card contributions to committee account
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/04/2025	Payee name Authorize.Net	
Amount (\$) \$12.92	Payee address; City; State; Zip Code P.O. Box 8999 San Francisco, CA 94128	
<input checked="" type="checkbox"/> Expenditure from corporate funds		
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 Processing fees for online/credit card contributions to committee account
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/04/2025	Payee name Authorize.Net	
Amount (\$) \$38.10	Payee address; City; State; Zip Code P.O. Box 8999 San Francisco, CA 94128	
<input type="checkbox"/> Expenditure from corporate funds		
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 Processing fees for online/credit card contributions to committee account
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: 2/2 Rpt: 14/14	2 FILER NAME Texas Society of Architects Committee	3 Filer ID (Ethics Commission Filers) 00016546
4 Date 01/31/2025	5 Payee name FiServ	
6 Amount (\$) \$353.87 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 979 Brookfield, WI 53008-0979	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank service charge for committee account
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/31/2025	Payee name FiServ	
Amount (\$) \$83.77 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 979 Brookfield, WI 53008-0979	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bank service charge for committee account
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held