GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC Instruction Gui	de explains how to complete this form. 1 Filer 1D (Ethics Commission Filers) 89534	2 Total pages filed: -7
3 COMMITTEE NAME Save ôr	or Schools PAC	OFFICE USE ONLY Date Received RECEIVED
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY: STATE; ZIP CODE PO BOX 57 ROGNOULE TX FLOLIN	
5 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST MI SUNULOIA A. NICKNAME LAST SUFFIX Tapia	POSTITATINE 2/21/23 Receipt # Amount \$ Date Processed3/19/25 Date Imaged
6 CAMPAIGN TREASURER STREETADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #; CITY; STATE; 15629 2103 Fort TX Edgeview rd. Worth	ZIP CODE 7U177
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; APT / SUITE #: CITY; STATE; 15629 2103 Horth TX Edgeviewrd. 2103 Worth TX	zip code 76177
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 336-4203	
9 REPORT TYPE	January 15 Sth day before election	Dissolution Report (Attach PAC-DR) 10th day after campaign treasurer termination
10 PERIOD COVERED	Month Day Year 9 / 10 / 2024 THROUGH	Month Day Year
11 ELECTION	1 < 05 < 1074	her escription
	GO TO PAGE 2	
L Forms provided by Texas Ethi	cs Commission www.ethics.state.tx.us	Revised 1/1/2025

R: 100994450

GENERAL-PURPOSE COMMITTEE PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME Save Or	wr Schools P	AC 13	Filer ID (Ethics Commission Filers)		
	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if				
(Attach lists on plain	applicable, classify by party.)	B. Opposed			
paper to complete this					
report if necessary.)	2. Measures	A. Supported	1111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	(Describe by date and				
	location of election and nature of issue.)	B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if				
	applicable, classify by party.)				
15 CONTRIBUTION		POLITICAL CONTRIBUTIONS (OTHER THAN R GUARANTEES OF LOANS, OR	\$		
TOTALS		DE ELECTRONICALLY)			
	Check here if this repo	ort qualifies for the higher itemization threshold	111,404.31		
	2. TOTAL POLITICAL C	CONTRIBUTIONS ES, LOANS, OR GUARANTEES OF LOANS)	* 111,909.32 \$111,909.32		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED F	OLITICAL EXPENDITURES	\$ 190		
	4. TOTAL POLITICAL E		\$ 190		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CON OF THE REPORTING F	NTRIBUTIONS MAINTAINED AS OF THE LAST D PERIOD	»Y \$ 15,225		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AM LAST DAY OF THE RE	HE \$			
		alty of perjury, that the accompanying r			
	nciudes all information requi	red to be reported by me under Title 15,	LICOUCH COUC.		
		Signature of Campaign 1	reasurer (Declarant)		
	Please c	omplete either option below:			
(1) Affidavit	, 10400 0				
(1) Affidavit					
AFFIX NOTARY STAMP /	SEALABOVE				
Sworn to and subscrit	bed before me, by the said	· · · · · · · · · · · · · · · · · · ·	, this the		
day of	_, 20, to certify whi	ich, witness my hand and seal of office.			
	······································				
Signature of officer adm	inistering oath Printed r	name of officer administering oath	Title of officer administering oath		
(2) Unsworn Declarat	ion				
My name is <u>SUM</u>	· · · · · · · · · · · · · · · · · · ·	, and my date of birth is			
My address is 1562	· · · · ·	+ 2103 Fort Worth TX	, FUITT USA .		
(city) (state) (zip code) (country)					
Executed in Devit	Executed in <u>Devitor</u> County, State of <u>TX</u> , on the <u>21st</u> day of <u>Feb</u> , 20 <u>25</u> . (month) (vear)				
		ment	Night Theory (Decilerant)		
		- •	aign Treasurer (Declarant)		
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SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

17		8 Filer ID (Ethics Cor	nmission Filers)
	Save our Schools PAC		I
19	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	·	\$111,904.37
2.	SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LAB	OR ORGANIZATION	\$
5.	SCHEDULE C2 : NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPO ORGANIZATION	RATION OR LABOR	\$
6.	SCHEDULE C3 : MONETARY SUPPORT FROM CORPORATION OR LABOR OR	GANIZATION	\$
7.	SCHEDULE C4 : NON-MONETARY SUPPORT FROM CORPORATION OR LABO	R ORGANIZATION	\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	RORGANIZATION	\$
9.	SCHEDULE E: LOANS		\$
10.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONT	RIBUTIONS	\$ 190
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CO	NTRIBUTIONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONT	RIBUTIONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIO	NS RETURNED	\$

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N.			
MONET	ARY POLITICAL CONTRIBU	TIONS	SCHEDULE A1
If the request	ed information is not applicable, DO NOT inclu	de this page in the repo	ort.
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	Our Schools PAC		
4 Date	5 Full name of contributor	; (ID#:)	7 Amount of contribution (\$)
10113124	DAMMY W. SimpSOM 6 Contributor address; City;	State; Zip Code	\$70,809.32
	pounohe	TX 76262	
,	pation / Job title (See Instructions)	9 Employer (See Instruc Tex Op Cons	tions) ,truction LP
Date	Full name of contributor Out-of-state PAC		Amount of contribution (\$)
	Caren C. Reaves		
1014124	Contributor address; City;	State; Zip Code	\$ 5,000
1• 1 - 1	Barton	wille TX 74226	
, ,	ation / Job title (See Instructions)	Employer (See Instruct	tions)
retir			
Date	Full name of contributor 🗌 out-of-state PAC	(ID#:)	Amount of contribution (\$)
10101 (01)	Jeffrey A. Diebold		
10/4/24	Contributor address; City;	State; Zip Code TX FU220	\$5,000
	Argyle	11 10224	
	ation / Job title (See Instructions)	Employer (See Instruc	tions)
retir			
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
1014124	Godwin G. Dixon		\$ 20,000
1011121	Contributor address; Flower Mound	State: Zip Code TX 75022	2 201-
	Mound		
	ation / Job title (See Instructions)	Employer (See Instruct	N
mari	igement	Teresu's t	Touse
	ATTACH ADDITIONAL COPIES O		
	If contributor is out-of-state PAC, please see Instru	uction guide for additional r	eporting requirements.
Forms provided by T	exas Ethics Commission www.ethics.	state.tx.us	Revised 1/1/2025

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The	nstruction Guide explains how to complete this form.	1 Total pages Schedule A1:
	e our Schools PAC	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Out-of-state PAC (ID#:	7 Amount of contribution (\$)
014124	6 Contributor address; City; State; Roanoble TX	Zip Code \$ 1,000 76262
B Principal occur Vetir		oyer (See Instructions)
Date	Full name of contributor) Amount of contribution (\$)
014124	· · · ·	Zip Code \$ 5,000
-	Argyle TX	76262
Principal occup Vetix		oyer (See Instructions)
Date 014124	Contributor address; City; Flower State; Mound TX	Zip Code $$5,000$ 75022
• •		oyer (See Instructions)
Date	Full name of contributorout-of-state PAC (iD#: Contributor address; City; State;	
Principal occup	ation / Job title (See Instructions) Empl	oyer (See Instructions)

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE	F 1	
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If the requested information	is not applicable, DO NOT	include this page in the report.

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repa Fees Office Ove Food/Beverage Expense Polling Ex; y Gift/Awards/Memorials Expense Printing Ex	yment/Reimbursement rhead/Rental Expense pense rpense /ages/Contract Labor	Solicitation/Fundrais Transportation Equij Travel In District Travel Out Of Distric Other (enter a categ	oment & Related Expense		
1 Total pages Schedule F1:	2 FILER NAME Save Our Schools T	PAC	3 Filer ID (Ethic	s Commission Filers)		
4 Date 10/4/24	Save Our Schools T 5 Payee name PNC Financial Service	ês.				
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code		
Expenditure from corporate funds	13308 N FWY	Fort Worth	TX	7617+		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
PURPOSE OF EXPENDITURE	Accounting / Banking	wire	expense			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder livin	g expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name {	Office sought		Office held		
Date	Payee name					
Amount (\$)	Payee address;	City;	State;	Zip Code		
Expenditure from corporate funds						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description				
	Check if travel outside of Texas. Complete Schødule T.	Check if Aust	tin, TX, officeholder living	g expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held		
Date	Payee name					
Amount (\$)	Payee address;	City;	State;	Zip Code		
Expenditure from corporate funds						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description				
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living	expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held		
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED			

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Revised 1/1/2025

		OFFICE	USE ONLY
AFFIDAVIT FOR C ELECTRONIC FILING	G EXEMPTION	Date Received	
		Date Hand-deliver	ed or Date Postmarked
Beginning on January 1, 2024, a campaign treasurer of that has accepted more than \$32,810 in political conti than \$32,810 in political expenditures in <u>any</u> calendar	ibutions or made more	Receipt #	Amount \$
subsequent reports electronically.		Date Processed	
Filer name Save Our Schools PAC	Filer ID #	Date Imaged	

- 1. I swear or affirm that the political committee of which I am the campaign treasurer has not accepted more than \$32,810 in political contributions or made more than \$32,810 in political expenditures in a calendar year.
- I further swear or affirm that the political committee of which I am the campaign treasurer does not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee.
- 3. I further swear or affirm that no person acting as the committee's agent or consultant, and no person with whom the committee contracts, uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee.
- 4. I further swear or affirm that I understand that I am required to file the committee's campaign finance reports electronically if the committee, the committee's agent or consultant, or a person with whom the committee contracts exceeds \$32,810 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee.
- 5. I am filing this affidavit with the <u>finance report</u> report due on 1017124understand that this affidavit is required to be filed with each campaign finance report for which the committee is claiming an exemption from electronic filing.

Please complete either option below:

(1) Affidavit			
		Signature of C	ampaign Treasurer
NOTARY STAMP/SEAL			
Sworn to and subscribed before me by		this the	day of,
20, to certify which, witness my h	and and seal of office.		
Signature of officer administering oath	Printed name of officer administering	oath	Title of officer administering oath
	OR		
(2) Unsworn Declaration My name is <u>Scurobia A.</u> My address is <u>15629 Edgevieu</u> (st Executed in <u>Devitor</u> county, s	$\frac{1}{2} \frac{1}{2} \frac{1}$	day of <u>Feb</u> (month)	TUTT USA (zip code) (country) , 20_75. (year) m Treasurer (Declarant)
	EXEMPT FROM THE ELECTRONI RED TO FILE CAMPAIGN FINANC		

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Revised 1/1/2024

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GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

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FORM GPAC COVER SHEET PG 1

The GPAC Instruction Gu	ide explains how to complete	this form.	1 Filer ID (Ethics Co	mmission Filers)	2 Total pages filed: T
3 COMMITTEE NAME	H				OFFICE USE ONLY
C			0		Date Received
Save 1	Jur School		C		RECEIVED
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SU	ITTE #; CI Roan	TY: STATE: Note TX	ZIP CODE 76262	
Change of Address	PO BOX 57	r un	one in		OCT 0 8 2024
					DENTON COUNTY ELECTIONS
				i	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	Date Hand-delivered or Date Postmarked
TREASURER	Sa	noloia	1	A	Receipt # Amount \$
		LAST	• • • • • • • • • • • • • • • • • • • •	SUFFIX	Date Processed
	To	upia			Date Imaged
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX P	,		STATE;	ZIP CODE
STREETADDRESS (Residence or Business)	15269	APT	1.103 Fort	XT	76177
	Edgeview rd		Worth	C .	
7 CAMPAIGN TREASURER	STREET ADDRESS OR PO BOX;	APT / SUIT	E#; CITY;	STATE;	ZIP CODE 76177
MAILING ADDRESS	15269	APT 2	103 Fort Worth	İX	
Change of Address	Edgeview rd			i	2 (1997) 7 1997 - 1997
8 CAMPAIGN TREASURER	AREA CODE PHONE I		EXTENSIO	IN	
PHONE	(214) 336	-9203			
9 REPORT TYPE	January 15	<u>~</u>	th day before election		Dissolution Report (Attach PAC-DR)
	July 15		h day before election	. []	10th day after campaign treasurer termination
10 PERIOD				:	
COVERED	Month Day	Year			Month Day Year
	9/18/	2024	THROUGH		10 / 7 / 2024
11 ELECTION	ELECTION DATE			ECTION TYPE	Milda - 11
	Month Day Year	Primary	Runoff		ner
	11/05/2024	🔀 General	Special	, . De	scription
				· · · · · · · · · · · · · · · · · · ·	
				•	
		GO TO P/	AGE 2		
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GENERAL-PURPOSE COMMITTEE PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

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$\int \frac{12}{20000000000000000000000000000000000$	- Schools PF	IC.	13 Filer	ID (Ethics Commission Filers)
14 COMMITTEE ACTIVITY	1. Candidates	A. Supported	<u>l</u>	·
	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper lo complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and			
	nature of issue.)	B. Opposed		
	3. Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)		. *	
15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED P	OLITICAL CONTRIBUTIONS (OTHER THAN	
TOTALS	CONTRIBUTIONS MAD	R GUARANTEES OF LOANS, (DE ELECTRONICALLY)	OR '	\$ 0.09.37
	Check here if this repo	ort qualifies for the higher iten	nization threshold	111,809.32
	2. TOTAL POLITICAL C (OTHER THAN PLEDGI	ONTRIBUTIONS ES. LOANS, OR GUARANTEE	S OF LOANS)	\$ 111, 804.32
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED P	OLITICAL EXPENDITURES		\$ 190
	4. TOTAL POLITICAL E	XPENDITURES	· · · · · · · · · · · · · · · · · · ·	\$ 190
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CON OF THE REPORTING P	ITRIBUTIONS MAINTAINED AS	S OF THE LAST DAY	\$ 15,225
OUTSTANDING LOAN TOTALS	LAST DAY OF THE REP		:	\$
16 SIGNATURE I		alty of perjury, that the ac ed to be reported by me u Signature Signature	a of Campaign Treast	is true and correct and ion Code.
(1) Affidavit				
	EOFTER A			
HINN TO	09/15/2		1	
Sworn to and subscribe	COF TEXTS	Janopia Te	ania	, this the 8th
day of Oct.		h, witness my hand and s		_, and the <u> </u>
Del. at al	Wood D	batala Maa	A DL	P. P.
Signature of officer admir	nistering oath Printed na	ame of officer administering of	oath Title	of offices administering oath
	· · · · · · · · · · · · · · · · · · ·	OR		
(2) Unsworn Declaratio	o n			
My name is	· · · · · · · · · · · · · · · · · · ·	, and my da	ite of birth is	
My address is	(street)		······································	*
Executed in	(street) County, State of	(city)		ip code) (country)
		, on the da	(month)	. 20 (year)
		Sin	nature of Campaign T	
orms provided by Texas Ethic	s Commission	www.ethics.state.tx.us		Revised 1/1/2024

F

S	ATRITATS PEDAT	ORM GPAC
17	COMMITTEE NAME 18 Filer ID (Ethics Co	ommission Filers)
	Save Our Schools PAC	
19	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 111, 800
2.	SCHEDULE A2 : NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
З.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	SCHEDULE C2 : NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	SCHEDULE C3 : MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	SCHEDULE C4 : NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	SCHEDULE E: LOANS	\$
10.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 190
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

	ted information is not applicable, DO NOT inclu	and hade in the leb	л.
The	Instruction Guide explains how to complete this	s form.	1 Total pages Schedule A1:
2 FILER NAME	e Our Schools PAC	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
4 Date		> (ID#:)	7 Amount of contribution (\$)
1013124		State; Zip Code TX 76262	\$70,809.32
	ewewt	9 Employer (See Instruct TexOp Cons	ions) struction LP
Date	Full name of contributor		Amount of contribution (\$)
014124	Caren C. Reaves Contributor address; City; Bartonvil	State: Zip Code Ne TX 76224	\$5,000
Principal occup	ation / Job title (See Instructions) eこ	Employer (See Instruct	ions)
Date	Full name of contributor Dout-of-state PAC Jeffrey A. Diebold	(1D#:)	Amount of contribution (\$)
1014124	Contributor address; City; Argyle	State; Zip Code TX 74224	\$5,000
Principal occup	alion / Job title (See Instructions) 2d	Employer (See Instructi	ons)
Date	Full name of contributor Dout-of-state PAC	(ID#)	Amount of contribution (\$)
014124	Contributor address: City; Flower Mound	state; Zip Code TX 75022	\$ 20,000
	ation / Job title (See Instructions)	Employer (See Instructi	
	igement	Teresa's Ho	VSC
		:	
	ATTACH ADDITIONAL COPIES O If contributor is out-of-state PAC, please see Instruc	F THIS SCHEDULE AS NE	EDED

	ARY POLITICAL CONT ted information is not applicable, DO N		-	ort.	SCHEDULE A1
The	Instruction Guide explains how to com	plete this form.		1 Tot	al pages Schedule A1;
2 FILER NAME		··		3 File	r ID (Ethics Commission Filers)
	OUr Schools PAC				
1 Date		of-state PAC (ID#:	(7 Amount of contribution (\$)	
014124	Ralph N. Marsha		•••••••••••••••••••••••••••••••••••••••		
01 11 4 1			•	\$	1,000
	Koc	mowe TX	TULUL		
Principal occu VC+ir-	pation / Job title (See Instructions)	9 Emplo	yer (See Instruct	ons)	
Date			·	<u></u>	
	Elizabeth N. Diebo	Id		Am	ount of contribution (\$)
014124	Contributor address; Cit	 /; State;	Zip Code	\$ 9	000
	Ary	yle TX	76220	, ,	
Principal occup retir	ation / Job title (See Instructions)	Employ	yer (See Instructi	ons)	
Date	Full name of contributor	f-state PAC (ID#:)	Am	ount of contribution (\$)
	will carlton		:		
0 4 124	Contributor address:	State;	Zip Code	4	5,000
	Ê		75022	Ŷ	
	alion / Job title (See Instructions)	Employ	/er (See Instruction	ons)	
vetirea			÷		
Date	Full name of contributor	-state PAC (ID#:)	Am	ount of contribution (\$)
			:		
	Contributor address; City;	State; 2	Zip Code		
Principal occup	ation / Job title (See Instructions)	Employ	rer (See Instructio	ons)	
			:		
			· · · · · · · · · · · · · · · · · · ·		
			1		
			·····		
	ATTACH ADDITIONAL C If contributor is out-of-state PAC, please s	OPIES OF THIS SC ee Instruction guide	HEDULE AS NE for additional rep	EDED porting	requirements.
is provided by Te	xas Ethics Commission www	w.ethics.state.tx.us		· · · · · · · · · · · · · · · · · · ·	Revised 1/1/2024

POLITICAL (CONTRIBUTIONS	1	SCHEDULE F
If the requested inform	nation is not applicable, DO NOT include	this page in the report.	
	EXPENDITURE CATEGO		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made I Candidate/Officeholder/Politic Credil Card Payment	Event Expense L Fees C Food/Beverage Expense F By Gilt/Awards/Memorials Expense F	oan Repayment/Reimbursement Office Overhead/Rental Expense folling Expense Minling Expense alaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expe Travel In District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1		iow to complete this form.	2 Files 10 /Filing Operations File
1 4 Date	Save Our School	IS PAC	3 Filer ID (Ethics Commission File
10/4/24	5 Payee name PNC Financial Ser	rvices	
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
Expenditure from corporate funds	13388 N FWY	Fort Worth	TX 7617
8	(a) Category (See Categories listed at the top of this sche	edule) (b) Description	
PURPOSE OF EXPENDITURE	Accounting / Bank	ing wire ex	pense
	(C) Check if travel outside of Texas. Complete Sched	ule ĩ, Check if Austir	n, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address;	City;	State; Zip Code
Expenditure from corporate funds			
	Category (See Categories listed at the top of this sched	ule) Description	
PURPOSE OF			
EXPENDITURE			
	Check if travel outside of Texas, Complete Schedu	lie T. Check if Austin	, TX, afficeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Pavee name	· · · · · · · · · · · · · · · · · · ·	
5510		:	
Amount (\$)	Payee address;	City;	State; Zip Code
Expenditure from corporate funds			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedu	lle) Description	
·····	Check if travel outside of Texas. Complete Schedul	eT. Check if Auntin	TX, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held

Forms provided by Texas Ethics Commission

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Revised 1/1/2024



AFFIDAVIT FOR COMMITTEE: ELECTRONIC FILING EXEMPTION

An exemption affidavit must be submitted with each paper report.

Beginning on January 1, 2024, a campaign treasurer of a political committee that has accepted more than \$32,810 in political contributions or made more than \$32,810 in political expenditures in <u>any</u> calendar year must file all subsequent reports electronically.

 Save Our Schools Now 1 I swear or affirm that the political committee of which I am the campaign treasurer has not accepted more than \$32,810 in political contributions or made more than \$32,810 in political expenditures in a calendar year. 2. I further swear or affirm that the political committee of which I am the campaign treasurer does not use computer equipment to keep current records of political contributions, political expenditures, or persons making political contributions to the committee. 3. I further swear or affirm that no person acting as the committee's agent or consultant, and no person with whom the committee contracts, uses computer equipment to keep current records of political contributions to the committee. 4. I further swear or affirm that I understand that I am required to file the committee's campaign finance reports electronically if the committee, the committee's agent or consultant, or a person with whom the committee contracts exceeds \$32,810 in political contributions or political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures in a calendar year, or uses computer equipment to keep current records of political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures in a calendar year, or uses computer equipment to keep current records of political contributions, political expenditures in a calendar year, or uses computer equipment to keep current records of political expenditures in a calendar year, or uses computer equipment to keep current records of political expenditures. 5. I am filing this affidavit with the <u>fivovoce repo</u>	Filer name	Filer ID #	
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OR 2) Unsworn Declaration My name is, and my date of birth is My address is, (street) (street) (city) (city) (city) (city) (street) (city) (city) (street) (city) (street) (city) (street) (city) (street) (month) (year) Signature of Campaign Treasurer (Declarant)	Delioral Wood	Deborahk	lood Notary Public
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Forms provided by Texas Ethics Commission

www.ethics.state.tx.us

Revised 1/1/2024

OFFICE USE ONLY

OCT 0 8 2024

DENTON COUNTY ELECTIONS

Date Hand delivered or Date Postmarked

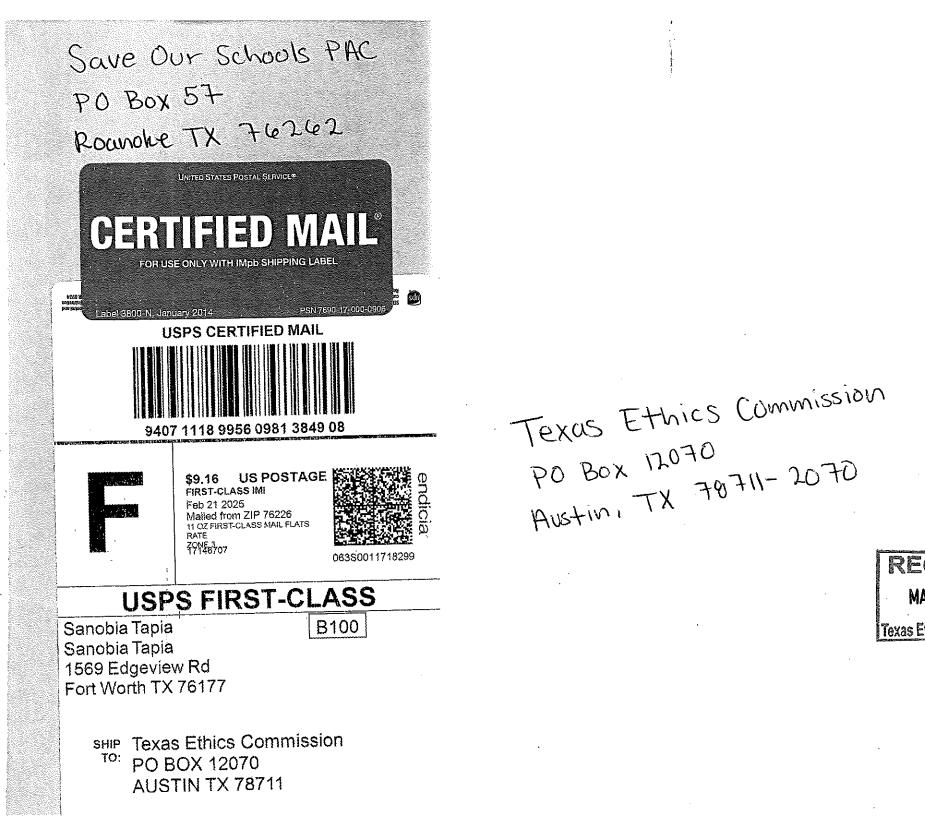
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Amount \$

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Receipt #

Date Processed



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