

# CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

<b>1</b> Filer ID (Ethics Commission Filers) 00015699	<b>2</b> Total pages filed: 7	<b>OFFICE USE ONLY</b>	
<b>3</b> COMMITTEE NAME Texas Court Reporters Association Funds Available for Involved Reporters PAC	Date Received ELECTRONICALLY FILED 04/01/2025		
<b>4</b> TREASURER NAME Ingram, Brooke C. (Mrs.)	Date Hand-delivered or Date Postmarked		
<b>5</b> ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	Receipt #
	<input type="checkbox"/> July 15	<input type="checkbox"/> 10th day after campaign treasurer resignation	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Dissolution report	Amount
	<input type="checkbox"/> 8th day before election	<input checked="" type="checkbox"/> Other (specify) <u>March 5</u>	Date Processed
<b>6</b> ORIGINAL PERIOD COVERED	Month Day Year 01/26/2025	THROUGH	Month Day Year 02/25/2025
Date Imaged			

**7 EXPLANATION OF CORRECTION**  
 I didn't mean to actually try and do a correction! I just hit the wrong button and there isn't a way to undo it that I can figure out. Our previously filed report is accurate.

**8 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

**Semiannual reports:** I swear or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

**Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Mrs. Brooke C. Ingram  
 \_\_\_\_\_  
 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

**Remember To Attach Any Part Of The Campaign Finance Report Form  
Needed To Report And Explain Corrections**

**MONTHLY FILING GENERAL-PURPOSE  
COMMITTEE CAMPAIGN FINANCE REPORT**

**FORM MPAC  
COVER SHEET PG 1**

<b>The MPAC Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00015699	<b>2</b> Total pages filed: 7
<b>3</b> COMMITTEE NAME Texas Court Reporters Association Funds Available for Involved Reporters PAC		<b>OFFICE USE ONLY</b> Date Received <b>ELECTRONICALLY FILED</b> 04/01/2025	
<b>4</b> COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP P.O. Box 2379  Athens, TX 75751		
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mrs.	Brooke C.	
	NICKNAME	LAST	SUFFIX
		Ingram	
<b>6</b> CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO BOX 2379  Athens, TX 75751		
<b>7</b> CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO BOX 2379  Athens, TX 75751		
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(903)	675-1806	
<b>9</b> REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)		
<b>10</b> 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		
<b>11</b> PERIOD COVERED	Month Day Year 01/26/2025		THROUGH Month Day Year 02/25/2025

**GO TO PAGE 2**

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Texas Court Reporters Association Funds Available for Involved Reporters PAC	<b>13 Filer ID</b> (Ethics Commission Filers) 00015699
--	---

<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b>	\$ 0.00
	<input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold	
	<b>2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)</b>	\$ 2,570.01
EXPENDITURE TOTALS	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 7.20
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 44.52
CONTRIBUTION BALANCE	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 10,114.73
OUTSTANDING LOAN TOTALS	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 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. Brooke C. Ingram  
\_\_\_\_\_  
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

<b>17 COMMITTEE NAME</b> Texas Court Reporters Association Funds Available for Involved Reporters PAC		<b>18 Filer ID</b> (Ethics Commission Filers) 00015699
<b>19 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,570.01
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
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 type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
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	\$ 44.52
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**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 1/2 Rpt: 5/7
2 FILER NAME Texas Court Reporters Association Funds Available for Involved Reporters PAC		3 Filer ID (Ethics Commission Filers) 00015699
4 Date 02/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Anderson, Teresa	7 Amount of Contribution (\$)  \$20.00
	6 Contributor address; City; State; Zip Code  Fischer, TX 78623	
8 Principal occupation / Job title (See Instructions) Certified Shorthand Reporter		9 Employer (See Instructions)
Date 02/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Frederick, Paula	Amount of Contribution (\$)  \$300.00
	Contributor address; City; State; Zip Code  Bryan, TX 77803	
Principal occupation / Job title (See Instructions) Certified Shorthand Reporter		Employer (See Instructions)
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Griffin, Carol	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Round Mountain, TX 78663	
Principal occupation / Job title (See Instructions) Certified Shorthand Reporter		Employer (See Instructions)
Date 02/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Langford, David W.	Amount of Contribution (\$)  \$1,850.00
	Contributor address; City; State; Zip Code  Athens, TX 75752	
Principal occupation / Job title (See Instructions) Certified Shorthand Reporter		Employer (See Instructions)
Date 02/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Schnoor, Lorrie Ann	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Round Rock, TX 78664	
Principal occupation / Job title (See Instructions) Certified Shorthand Reporter		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/2 Rpt: 6/7
<b>2</b> FILER NAME Texas Court Reporters Association Funds Available for Involved Reporters PAC		<b>3</b> Filer ID (Ethics Commission Filers) 00015699
<b>4</b> Date 02/19/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Square Capital, LLC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Oakland, CA 94612	<b>7</b> Amount of Contribution (\$)  \$0.01
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Trevino, Sonia G. <hr/> Contributor address; City; State; Zip Code  Corpus Christi, TX 78415	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Certified Shorthand Reporter		Employer (See Instructions)
Date 02/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wofford, Erica <hr/> Contributor address; City; State; Zip Code  Cedar Park, TX 78613	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Certified Shorthand Reporter		Employer (See Instructions)

# 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 -<br>Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/1 Rpt: 7/7	<b>2</b> FILER NAME Texas Court Reporters Association Funds Available for	<b>3</b> Filer ID (Ethics Commission Filers) 00015699
--	--	--

<b>4</b> Date 02/10/2025	<b>5</b> Payee name INTUIT QUICKBOOKS
-----------------------------	--

<b>6</b> Amount (\$) \$37.31	<b>7</b> Payee address; City; State; Zip Code 2700 Coast Avenue  Mountain View, CA 94043
---------------------------------	---

Expenditure from corporate funds

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</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 Intuit/Quickbooks subscription charge for online bookkeeping.
---------------------------------	---	---

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 02/19/2025	Payee name Square Capital, LLC
--------------------	-----------------------------------

Amount (\$) \$0.01	Payee address; City; State; Zip Code 1955 Broadway, Suite 816  Oakland, TX 94612
-----------------------	---

Expenditure from corporate funds

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Square Capital banking fee to verify bank account is a true deposit account for accepting payments.
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--	--	--