CORRECTION/AMENDMENT AFFIDAVIT FORM COR-PAC FOR POLITICAL COMMITTEE Filer ID (Ethics Commission Filers) 2 Total pages filed: **OFFICE USE ONLY** 00089509 Date Received COMMITTEE **Bulldogs For A Better Future ELECTRONICALLY FILED** NAME 07/29/2025 TREASURER Strong, Robert (Mr.) NAME Date Hand-delivered or Date Postmarked **ORIGINAL** January 15 Runoff REPORT TYPE Receipt # Amount July 15 10th day after campaign treasurer resignation 30th day before election Dissolution report Date Processed 8th day before election Other (specify) ORIGINAL PERIOD Month Year Day Year Day Month Date Imaged **COVERED THROUGH** 01/01/2025 07/10/2025 **EXPLANATION OF CORRECTION** We realized that we needed to donate left-over funds, so we donated to our district's education foundation. 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.

Sworn to and subscribed before me, by the said ______, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Title of officer administering oath

Mr. Robert Strong
Signature of Campaign Treasurer

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

Printed name of officer administering oath

Signature of officer administering oath

AFFIX NOTARY STAMP / SEAL ABOVE

FORM SPAC SPECIFIC-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The SPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 10 00089509 3 COMMITTEE NAME **OFFICE USE ONLY Bulldogs For A Better Future** Date Received **ELECTRONICALLY FILED** 07/29/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** PO 1432 Date Hand-delivered or Date Postmarked Quitman, TX 75783 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Robert NAME NICKNAME LAST **SUFFIX** Strong STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 960 CR 2375 STREET **ADDRESS** (Residence or Business) Alba, TX 75410 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 960 CR 2375 MAILING **ADDRESS** Golden, TX 75410 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (903) 520-0227 PHONE REPORT January 15 30th day before election Exceeded modified reporting limit **TYPE** Dissolution (Attach PAC-DR) 8th day before election X July 15 Runoff 10th day after campaign treasurer termination 10 PERIOD Month Year Month Day Day COVERED **THROUGH** 07/10/2025 01/01/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Other Primary Runoff 05/03/2025 χ Special General

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

| 12 COMMITTEE NAME | | | 13 Filer ID | (Ethics Comn | nission Filers) | |
|---|---|---|-----------------|-----------------|-----------------|--|
| Bulldogs For A Better Fi | uture | | 00089509 | | | |
| 14 COMMITTEE PURPOSE | | CANDIDATE / OFFICEHOLDER NAME | | | | |
| (Attach lists on plain paper to complete this report if necessary.) | paper to complete this Candidate | | | | | |
| C cupper | | | | | | |
| X SUPPORT (Candidate or Measure) | | BALLOT IDENTIFICATION / # | ELECTI | ON DATE | | |
| | | | Month | Day | Year | |
| OPPOSE (Candidate or Measure) | | | 05/03/2 | 2025 | | |
| ASSIST | X Measure | DESCRIPTION | | | | |
| (Officeholder) | DESCRIPTION | | | | | |
| 15 CONTRIBUTION TOTALS | | I FRIBUTIONS OF \$50 OR LESS (OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE LESS ITEMIZED | N PLEDGES, | \$ | \$0.00 | |
| | 2. TOTAL POLITICAL CO | ONTRIBUTIONS | | \$ | | |
| (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | | | | | \$7,200.00 | |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | | | | \$0.00 | |
| | 4. TOTAL POLITICAL EX | (PENDITURES | | \$ | \$6,325.91 | |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTREPORTING PERIOD | TRIBUTIONS MAINTAINED AS OF THE LAST | DAY OF THE | \$ | \$874.09 | |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMO DAY OF THE REPORTIN | UNT OF ALL OUTSTANDING LOANS AS OF G PERIOD | THE LAST | \$ | \$0.00 | |
| 16 AFFIDAVIT | | I swear, or affirm, under penalty of per and correct and includes all informatio Title 15, Election Code. | | | | |
| | | Mr. Rob | ert Strong | | | |
| AFFIX NOTARY | STAMP / SEAL ABOVE | Signature of Ca | mpaign Treasur | er | | |
| | | , t | his the | | _ day | |
| of | , 20, to certify which | ı, witness my hand and seal of office. | | | | |
| Signature of officer adı | ministering oath Print | ed name of officer administering oath | Title of office | er administerii | ng oath | |

SUBTOTALS - SPAC

FORM SPAC COVER SHEET PG 3

| | | | | JVLK SHLLI | 4 of 10 |
|-----|-------------------|--|-----------------------------|--------------------|-----------|
| | | EE NAME For A Better Future | 18 Filer ID 00089509 | (Ethics Commission | n Filers) |
| | HEDULE ME OF S | SUBTOTAL A | MOUNT | | |
| 1. | X | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ | 2,100.00 |
| 2. | | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | |
| 3. | | \$ | | | |
| 4. | X | \$ | 5,100.00 | | |
| 5. | | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION | ATION OR | \$ | |
| 6. | | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (| ORGANIZATION | \$ | |
| 7. | | SCHEDULE E: LOANS | | \$ | |
| 8. | X | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | S | \$ | 6,325.91 |
| 9. | | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | |
| 10. | | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | ONS | \$ | |
| 11. | | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | |
| 12. | | SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS | OF C/OH | \$ | |
| 13. | X | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | ONS | \$ | 793.10 |
| 14. | | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER | RETURNED | \$ | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| | MONET | ARY POLITICAL CONTRIBUTION | SCHEDULE A | | | |
|---|---|---|--|--------------------------------------|-----------------------------|------------|
| | The Instru | ction Guide explains how to complete this f | 1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/10 | | | |
| 2 | FILER NAME Bulldogs For | r A Better Future | 3 | Filer ID (Ethics Commission 00089509 | on Filers) | |
| 4 | Date 04/01/2025 5 Full name of contributor out-of-state PAC (ID#:) Attaway, Sally (Mrs.) 6 Contributor address; City; State; Zip Code | | | | Amount of Contribution (\$) | \$500.00 |
| Ļ | | Quitman, TX 75783 | | Ĺ | | |
| 8 | Principal occu | upation / Job title (See Instructions) | 9 Employer (See Instructions | 5) | | |
| | Date 04/04/2025 | Full name of contributor out-of-state PAC (ID#: Dodge, Michael Contributor address; City; State; Zip Code | | • | Amount of Contribution (\$) | \$1,500.00 |
| | | Quitman, TX 75783 | | Ĺ | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | 5) | | |
| | Date 04/15/2025 | Full name of contributor out-of-state PAC (ID#: Dunn, Randy Contributor address; City; State; Zip Code |) | | Amount of Contribution (\$) | \$100.00 |
| | | Quitman, TX 75783 | | | | |
| | Principal occu | upation / Job title (See Instructions) | Employer (See Instructions | s) | | |
| | | | | | | |

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

| ⊢ | | | | |
|---|--------------|---|---|--|
| | The Instru | ction Guide explains how to complete this form. | 1 | Total pages Schedule C1: Sch: 1/1 Rpt: 6/10 |
| 2 | FILER NAME | | 3 | Filer ID (Ethics Commission Filers) |
| | Bulldogs For | A Better Future | | 00089509 |
| 4 | Date | 5 Corporation / Labor Organization name | 7 | Amount of contribution (\$) |
| | 04/15/2025 | Coventry Financial | | \$100.00 |
| | | 6 Corporation / Labor Organization address; City; State; Zip Code | | |
| | | Quitman, TX 75783 | | |
| | Date | te Corporation / Labor Organization name | | Amount of contribution (\$) |
| | 03/14/2025 | Harris Craig Architects | | \$3,000.00 |
| | | Corporation / Labor Organization address; City; State; Zip Code | | |
| | | Tyler, TX 75703 | | |
| | Date | Corporation / Labor Organization name | | Amount of contribution (\$) |
| | 03/24/2025 | Jackson Construction Company | | \$2,000.00 |
| | | Corporation / Labor Organization address; City; State; Zip Code | | |
| | | | | |
| | | Quitman, TX 75783 | | |
| | | | | |

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

| | Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | | , |
|---|--|--|--|
| 1 | Total pages Schedule F1: Sch: 1/2 Rpt: 7/10 | 2 FILER NAME Bulldogs For A Better Future | 3 Filer ID (Ethics Commission Filers) 00089509 |
| 4 | Date | 5 Payee name | |
| | 04/23/2025 | Dodge, Michael | |
| 6 | Amount (\$) | 7 Payee address; City; State; Zip Code | |
| | \$883.31 | 1348 County Road 3235 | |
| | | Quitman, TX 75783 | |
| 8 | PURPOSE | (a) Category (See Categories listed at the top of this schedule) (b) D | Description |
| | OF EXPENDITURE | Reimbursement for personal money spent. | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | | Money was paid for mailing out mailers by individual, so we reimbursed the individual. |
| • | Complete ONLY if direct | | |
| 9 | Complete <u>ONLY</u> if direct expenditure to benefit C/Oh | Candidate/Officeholder name Office sought | Office held |
| | Date | Payee name | |
| _ | 04/09/2025 | MPrints-Printing Inc | |
| | Amount (\$) \$3,445.00 | Payee address; City; State; Zip Code 125 N. Johnson | |
| | φο,4 4 0.00 | 120 N. 0011113011 | |
| | | Mineola, TX 75773 | |
| | PURPOSE OF | , , , | Description Check if travel outside of Texas. Complete Schedule T. |
| | EXPENDITURE | Printing Expense | Check if travel outside of Texas. Complete Schedule 1. Check if Austin, TX, officeholder living expense |
| | | | Printed yard sign, table tents, and banners for promoting school bond. |
| | Complete ONLY if direct expenditure to benefit C/Oh | Candidate/Officeholder name Office sought | Office held |
| | Date | Payee name | |
| | 04/14/2025 | McAuley Labels | |
| | Amount (\$) | Payee address; City; State; Zip Code | |
| | \$1,045.00 | 109 E. Goode St | |
| | | Quitman, TX 75783 | |
| | PURPOSE OF | , , , | Description Chack if traval outside of Toyas, Complete Schodule T |
| | EXPENDITURE | Printing Expense | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense |
| | | P | Printed postcards for advertising. |
| | Complete ONLY if direct | Candidate/Officeholder name Office sought | Office held |
| | expenditure to benefit C/OF | 9 | Office Held |
| | | _ | |
| | | | |
| | | | |

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

| | Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment | / - al Co | mmittee | Gift/Awards Legal Servi | age Expense /Memorials Expe ces uction Guide | | | pens ages | e /Contract Labor | | Travel in District Travel Out of Di OTHER (enter a | | re) |
|---|---|--------------|---------------|----------------------------|---|----------------|-----------|--------------|--------------------------------|--------|--|--------------------|-----------|
| 1 | Total pages Schedule F1: | 2 | FILER NAM | Ξ | | | | | | 3 | Filer ID | (Ethics Commissio | n Filers) |
| | Sch: 2/2 Rpt: 8/10 | | Bulldogs Fo | or A Bette | er Future | | | | | | 00089509 | | |
| 4 | Date | 5 | Payee name | | | | | | | | | | |
| | 04/22/2025 | | McAuley La | abels | | | | | | | | | |
| 6 | Amount (\$) | 7 | Payee addre | ss; C | ity; | State: | Zip Co | de | | | | | |
| | \$952.60 | | 109 E. Goo | | <i>,</i> | • | · | | | | | | |
| | , | | | | | | | | | | | | |
| | | | Quitman, T | X 75783 | | | | | | | | | |
| _ | DUDDOCE | (0) | | | | | T | (h) | D | | | | |
| 8 | PURPOSE OF | (a) | Category (S | | s listed at the to | o of this sche | edule) | (D) | Description Check if travel (| nutsii | de of Texas Com | nplete Schedule T. | |
| | EXPENDITURE | | Printing Ex | pense | | | | | | | officeholder living | | |
| | | | | | | | | | | Oft k | oanner for a | dvertising voting | for |
| | | | | | | | | | school bond. | | | | |
| 9 | Complete ONLY if direct expenditure to benefit C/OI | | Candidate/Off | iceholder | name | 0 | ffice sou | ght | | | Office h | eld | |
| | | | | | | | | | | | | | |

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

| F | | | | | | | | |
|---|---|--|--|--|--|--|--|--|
| l | The Instruction Guide explains how to complete this form. | | | | | | | |
| 1 | Total pages Schedule I: Sch: 1/1 Rpt: 9/10 Date | 2 FILER NAME Bulldogs For A Better Future 3 Filer ID (Ethics Commission Filers) 00089509 5 Payee name | | | | | | |
| | 07/10/2025 | Quitman Lake Country Charitable Foundation/Quitman Education Fund | | | | | | |
| 6 | Amount (\$) 793.10 | 7 Payee Address; City; State; Zip PO Box 1453 Quitman, TX 75783 | | | | | | |
| 8 | PURPOSE OF EXPENDITURE | (a) Category (See instructions for examples of acceptable categories) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description (See instructions regarding type of information required.) Donation of left-over funds to Quitman Education Fund | | | | | | |

POLITICAL COMMITTEE AFFIDAVIT OF DISSOLUTION

FORM PAC-DR

10 of 10

| The Instruction Guide explains how to complete only if "Report Type" on page 1 is marked "Disse | | |
|---|--|---|
| COMMITTEE NAME | | 2 Filer ID (Ethics Commission Filers) |
| Bulldogs For A Better Future | | 00089509 |
| Affidavit of Dissolution | | |
| I, the undersigned campaign treasurer, do not expect committee for this or any other campaign or election declare that all of the information required to be reported to a dissolution report terminates the appoint committee may not make or authorize political expension appointment of campaign treasurer on file. | for which reporting under the orted by me has been reporte ment of campaign treasurer. | e Election Code is required. I d. I understand that designating a I further understand that a political |
| | | obert Strong |
| | Signature of 0 | Campaign Treasurer |
| | | |
| | DO NOT SIGN UNLESS POLITIC | CAL COMMITTEE IS TO BE DISSOLVED |
| AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said | | the, |
| Signature of officer administering oath Printed name | e of officer administering oath | Title of officer administering oath |