#### 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) 00088744 3 COMMITTEE NAME **OFFICE USE ONLY** Central Texas Democrats PAC Date Received **ELECTRONICALLY FILED** 07/07/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1150 N. Loop 1604 West Date Hand-delivered or Date Postmarked Ste. 108-230 San Antonio, TX 78248 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Christopher NAME NICKNAME LAST **SUFFIX** Koob STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1150 N. Loop 1604 West STREET **ADDRESS** Ste. 108-230 (Residence or Business) San Antonio, TX 78248 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1150 N. Loop 1604 West MAILING **ADDRESS** Ste. 108-230 San Antonio, TX 78248 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (202) 552-0221 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Х Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2025 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/03/2026 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)	
Central Texas Democrats PAC		00088744		
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if 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		
		Б. Оррозец		
	Officeholders     Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	IL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	8,950.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	12,309.02
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	1,764.07
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT	•		<u> </u>	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Christop	her Koob	
		Signature of Car	npaign Treasu	ırer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
		, tr	is the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of office	cer administering oath

### **SUBTOTALS - GPAC**

# FORM GPAC COVER SHEET PG 3

3 of 13			
17 COMMITTEE NAME 18 Filer ID			(Ethics Commission Filers)
Central T	Central Texas Democrats PAC 00088744		
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 8,950.0
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	DR .	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$
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. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 12,309.0
11.	11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$		\$
12.	2. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$		\$
13.	13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$		\$
15. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$ 40.0

TARY POLITICAL CONTRIB	BUTIONS SCHEDULE A1
uction Guide explains how to comple	te this form.  1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/13
E xas Democrats PAC	3 Filer ID (Ethics Commission Filers) 00088744
5 Full name of contributor out-of-state Texas Majority PAC  6 Contributor address; City; State; Zip Code	PAC (ID#:) <b>7</b> Amount of Contribution (\$)  \$8,950.00
Washington, DC 20003	
cupation / Job title (See Instructions)	9 Employer (See Instructions)
	cas Democrats PAC  5 Full name of contributor  out-of-state Texas Majority PAC  6 Contributor address; City; State; Zip Code

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/8 Rpt: 5/13	Central Texas Democrats PAC 00088744
4	Date	5 Payee name
	01/28/2025	Amalgamated Bank
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$14.25	275 7th Ave
Х	Expenditure from corporate funds	New York, NY 10001-6708
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	EXIL ENDITORE	Check if Austin, TX, officeholder living expense
		Bank Fees
_	Compulate ONII V if direct	Condidate/Officeholder years Office sought Office hold
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/28/2025	Amalgamated Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.25	275 7th Ave
	Expenditure from corporate funds	New York, NY 10001-6708
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Bank Fees
		Duik i ees
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/26/2025	Amalgamated Bank
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.00	275 7th Ave
_	Expenditure from	
L	corporate funds	New York, NY 10001-6708
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Bank Fees
		Daille 1 de la constant de la consta
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	

### 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)

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 2/8 Rpt: 6/13	Central Texas Democrats PAC	00088744
4 Date	5 Payee name	'
02/26/2025	Amalgamated Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$14.00	275 7th Ave	
X Expenditure from corporate funds	New York, NY 10001-6708	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Bank Fees
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	I Ight Office held
expenditure to benefit C/OI		
Date	Payee name	
03/27/2025	Amalgamated Bank	
		odo
Amount (\$) \$14.00	Payee address; City; State; Zip Co 275 7th Ave	oue
\$14.00	275 fill Ave	
X Expenditure from corporate funds	New York, NY 10001-6708	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Bank Fees
		Banki ccs
Complete ONLY if direct	Candidate/Officeholder name Office sou	l ght Office held
expenditure to benefit C/OI		gine and a
Date	Pausa nama	
03/27/2025	Payee name Amalgamated Bank	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$51.00	275 7th Ave	
X Expenditure from	Navy Varia NIV 10001 6700	
corporate failed	New York, NY 10001-6708	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Bank Fees
Complete ONLY if direct	Candidate/Officeholder name Office sou	I Ight Office held
expenditure to benefit C/OI		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
		_
1 Total pages Schedule F1:		
Sch: 3/8 Rpt: 7/13	Central Texas Democrats PAC 00088744	
4 Date	5 Payee name	
04/25/2025	Amalgamated Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Code	-
\$32.00	275 7th Ave	
Ψ02.00	210 1417/40	
X Expenditure from corporate funds		
corporate funds	New York, NY 10001-6708	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Bank Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experialiture to benefit C/Oi	1	
Date	Payee name	_
04/25/2025	Amalgamated Bank	
Amount (\$)	Payee address; City; State; Zip Code	_
\$14.00	275 7th Ave	
Ψ14.00	213 Tut Ave	
Expenditure from		
corporate funds	New York, NY 10001-6708	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense	
	Bank Fees	
		_
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experience to benefit of or	•	
Date	Payee name	
05/29/2025	Amalgamated Bank	
Amount (\$)	Payee address; City; State; Zip Code	_
\$14.00	275 7th Ave	
Expenditure from	Now York, NV 10001 6709	
corporate funds	New York, NY 10001-6708	_
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense  Bank Fees	
	Daile I CC3	
Operation Children	Open fields (Office health are reserved)	_
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
		_
		_

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
Sch: 4/8 Rpt: 8/13	Central Texas Democrats PAC 00088744	
4 Date	5 Payee name	
05/30/2025	Amalgamated Bank	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$14.00	275 7th Ave	
Expenditure from corporate funds	New York, NY 10001-6708	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Bank Fees	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O		
Date	Payee name	_
06/27/2025	Amalgamated Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$14.00	275 7th Ave	
\$14.00	273 Tull Ave	
Expenditure from corporate funds	New York, NY 10001-6708	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Fees  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Bank Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
experiordire to benefit C/O		
Date	Payee name	
06/27/2025	Amalgamated Bank	
Amount (\$)	Payee address; City; State; Zip Code	
\$14.00	275 7th Ave	
Expenditure from corporate funds	New York, NY 10001-6708	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	Check if Austin, TX, officeholder living expense  Bank Fees	
	Danki ees	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/O		
		_

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/8 Rpt: 9/13	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
01/17/2025	Cavanagh, Brendan
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,392.82	1150 N. Loop 1604 West
	Ste 108-230
Expenditure from corporate funds	San Antonio, TX 78248
	1
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/17/2025	Dickison, Madison
Amount (\$)	Payee address; City; State; Zip Code
\$1,932.77	1150 N. Loop 1604 West
Ψ1,332.11	
Expenditure from	Ste 108-230
corporate funds	San Antonio, TX 78248
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Salaries/Wages/Contract Labor
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Campaign Staff Salaries
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/02/2025	Google
Amount (\$)	
\$115.13	1600 Amphitheatre Pkwy
Expenditure from	
corporate funds	Mountain View, CA 94043-1351
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Software Subscription Check if travel outside of Texas. Complete Schedule T.
LAI LINDITORE	Check if Austin, TX, officeholder living expense
	Software Subscription
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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)

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 6/8 Rpt: 10/13	2 FILER NAME Central Texas Democrats PAC 3 Filer ID (Ethics Commission Filers) 00088744
4 Date 02/03/2025	5 Payee name Google
6 Amount (\$) \$88.39	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy
Expenditure from corporate funds	Mountain View, CA 94043-1351
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Software Subscription  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Software Subscription
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date 01/17/2025	Payee name Ibarra, Lesly
Amount (\$) \$1,932.77  Expenditure from corporate funds	Payee address; City; State; Zip Code 1150 N. Loop 1604 West Ste 108-230 San Antonio, TX 78248
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Staff Salaries
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 02/03/2025	Payee name Intuit
Amount (\$) \$12.77	Payee address; City; State; Zip Code 2700 Coast Ave
Expenditure from corporate funds	Mountant View, CA 94043
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Software Subscription  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Software Subscription
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 7/8 Rpt: 11/13	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
01/02/2025	MBA Consulting Group
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	611 Pennsylvania Ave SE
	# 143
X Expenditure from corporate funds	Washington, DC 20003-4303
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Compliance Services
	Compliance Convices
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
01/17/2025	Payroll Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$53.23	4224 Henderson Blvd
Expenditure from corporate funds	Tampa, FL 33629-5611
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Payroll Fee
	T ayron 1 do
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
01/17/2025	Payroll Data Processing
Amount (\$)	Payee address; City; State; Zip Code
\$2,756.33	4224 Henderson Blvd
φ2,730.33	4224 Heliuelsoff Divu
Expenditure from corporate funds	Tampa, FL 33629-5611
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
LAFENDITORE	Check if Austin, TX, officeholder living expense
	Payroll Taxes
Complete CALL V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/8 Rpt: 12/13	Central Texas Democrats PAC 00088744
4 Date	5 Payee name
03/04/2025	Payroll Data Processing
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$275.91	4224 Henderson Blvd
X Expenditure from corporate funds	Tampa, FL 33629-5611
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Payroll Fee
	T dyfoli i CC
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
01/07/2025	Stamps.com
Amount (\$)	Payee address; City; State; Zip Code
\$20.19	4301 Bull Creek Rd
Expenditure from corporate funds	Austin, TX 78731
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Postage
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
01/15/2025	Stamps.com
Amount (\$)	Payee address; City; State; Zip Code
\$5.21	4301 Bull Creek Rd
•	
Expenditure from corporate funds	Austin, TX 78731
-	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Solicitation/Fundraising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Postage
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 13/13 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Central Texas Democrats PAC 00088744 Date 8 Amount (\$) 5 Name of person from whom amount is received 01/15/2025 \$40.00 Stamps.com 6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78731 7 Purpose for which amount is received Check if political contribution returned to filer Refund from Vendor