#### 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) 00070105	2 Total pages filed: 6
3 COMMITTEE NAME		1	OFFICE USE ONLY
Planned Parentho	od Texas Votes PAC		
			Date Received
			ELECTRONICALLY FILED
			06/05/2025
4 COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP	
ADDRESS	PO BOX 41646		
	Austin, TX 78704		Date Hand-delivered or Date Postmarked
5 CAMPAIGN	MS / MRS / MR FIRST	MI	
TREASURER NAME	Dr. Carla		Receipt # Amount
			Date Processed
	NICKNAME LAST	SUFF	IX
	Brailey		Date Imaged
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY; S	TATE; ZIP CODE
STREET	200 E Ben White Blvd., Bldg B		
ADDRESS			
(Residence or Business)	Austin, TX 78704		
7 CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; S	TATE; ZIP CODE
TREASURER	200 E Ben White Blvd., Bldg B	,	
MAILING ADDRESS			
	Austin, TX 78704		
8 CAMPAIGN TREASURER	AREA CODE PHONE NUMBER	EXTENSION	
PHONE	(713) 907-9651		
9 REPORT TYPE	X Monthly	10th day after campaign	Dissolution (Attach PAC-DR)
		L treasurer termination	
10 MONTHLY REPORT FILING	January 5 April	5 July 5	October 5
DEADLINE			
	February 5 May	5 August 5	November 5
	March 5 X June	5 September 5	December 5
11 PERIOD	Month Day Year	THROUGH Month	Day Year
COVERED	04/26/2025	05/25	/2025
	•		
	GO 1	TO PAGE 2	
Forms provided by Te	xas Ethics Commission www.et	hics.state.tx.us	Version V4.1.0.e02d6221

#### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

## FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME Planned Parenthood Te	exas Votes PAC		13 Filer ID 00070105	(Ethics Commission Filers)
	T		00010100	
14 COMMITTEE ACTIVITY	1. 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		
	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.)			
<b>15</b> CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA	L CONTRIBUTIONS	\$	
	(OTHER THAN PLEI	DGES, LOANS, OR GUARANTEES OF LOANS)	φ	230.63
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	1.80
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,176.09
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	46,452.51
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	I			
		I swear, or affirm, under penalty of pe true and correct and includes all inform under Title 15, Election Code.	rjury, that the a mation require	accompanying report is d to be reported by me
		Dr. Carl	a Brailey	
		Signature of Car	_	irer
		2		
AFFIX NOTARY	STAMP / SEAL ABOVE			
		, tł	nis the	day
of	_, 20, to certify v	which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offi	cer administering oath
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.e02d6221

#### FORM MPAC COVER SHEET PG 3

3 of 6

17 COMMITTEE NAME 18 Filer ID (			(Ethics Commission Filers)
Planned Parenthood Texas Votes PAC 00070105			
19 SCHEDUL NAME OF	SUBTOTAL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 230.63
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	TION OR	\$
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
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> 510.02
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		<b>\$</b> 666.07
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

**SUBTOTALS - MPAC** 

### MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/6
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	renthood Texas Votes PAC		00070105
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
05/16/2025	Brotman, Susan P.		\$18.0
	6 Contributor address; City; State; Zip Code		
2 Dringing ago	Austin, TX 78748		<u>`</u>
8 Principal occu Retired	upation / Job title (See Instructions)	9 Employer (See Instructions) Retired	;)
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
04/29/2025			\$20.8
	Contributor address; City; State; Zip Code		
	El Paso, TX 79912		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>
Nurse		Tenet	7
			Amount of Contribution (\$)
Date 05/08/2025	Full name of contributor out-of-state PAC (ID#: Lambert, Liz	)	Amount of Contribution (\$) \$83.3
00/00/2020	· · · · · · · · · · · · · · · · · · ·		ψυσ.,
	Contributor address; City; State; Zip Code		
	Austin, TX 78703		
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions	l 3)
Designer		MML	
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
05/01/2025	Linton, Melaney A.		\$103.4
	Contributor address; City; State; Zip Code		
	Houston, TX 77023		
	upation / Job title (See Instructions)	Employer (See Instructions	
Executive		Planned Parenthood Gu	Ilf Coast
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
05/16/2025	05/16/2025 Siemers-Kennedy, Laura		\$5.0
	Contributor address; City; State; Zip Code		
Di indaan	Houston, TX 77019		<u> </u>
-	upation / Job title (See Instructions)	Employer (See Instructions	•)
Engineer		Mott MacDonald	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Food/Beverage Expense Pollin y - Git/Awards/Memorials Expense Printi	Repayment/Reimbursement Overhead/Rental Expense g Expense g Expense es/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1: Sch: 1/1 Rpt: 5/6	2 FILER NAME Planned Parenthood Texas Votes PAC	3	Filer ID (Ethics Commission Filers) 00070105
4 Date 05/02/2025	<ul> <li>5 Payee name Paragon Solutions</li> </ul>		00070103
6 Amount (\$) \$508.22	<ul> <li>Payee address; City; State; Zip</li> <li>201 Main St #1150</li> </ul>	Code	
Expenditure from corporate funds	Fort Worth, TX 76102		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	Check if Austin, TX	side of Texas. Complete Schedule T. <, officeholder living expense I processing fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office H	sought	Office held

UNPAID INCURRED OBLIGATIONS			
			SCHEDULE F2
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Fees Food/Beverage Expense / - Gift/Awards/Memorials Expen al Committee Legal Services	TEGORIES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense se Printing Expense Salaries/Wages/Contract Labor xplains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
<b>1</b> Total pages Schedule F2:			3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt: 6/6	Planned Parenthood Texas Vote	es PAC	00070105
<sup>4</sup> TOTAL OF UNITEMIZ	ZED UNPAID INCURRED OBLIC	GATIONS	\$
5 Date	6 Payee name		
05/22/2025	Atchley & Associates LLP	Otata Zin Orda	
7 Amount (\$) \$592.50	8 Payee address; City; 1005 La Posada Dr	State; Zip Code	
Expenditure from corporate funds	Austin, TX 78752		
9 TYPE OF EXPENDITURE	X Political	Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Accounting/Banking	Check if travel	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense ting and reporting services
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held
Date 05/05/2025	Payee name Planned Parenthood Texas Vote	es	
Amount (\$) \$73.57	Payee address; City; 2708 S Lamar Blvd Ste 200A	State; Zip Code	
Expenditure from corporate funds	Austin, TX 78704		
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Salaries/Wages/Contract Labor	Check if travel	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense <b>1</b> C
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held