

# CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

<b>1</b> Filer ID (Ethics Commission Filers) 00087838		<b>2</b> Total pages filed: 29		<b>OFFICE USE ONLY</b>	
<b>3</b> COMMITTEE NAME Democratic Club of Polk County				Date Received ELECTRONICALLY FILED 06/03/2025	
<b>4</b> TREASURER NAME Oates, Tena R. (Ms.)				Date Hand-delivered or Date Postmarked	
<b>5</b> ORIGINAL REPORT TYPE		<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> July 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> 8th day before election		<input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer resignation <input type="checkbox"/> Dissolution report <input type="checkbox"/> Other (specify) _____	
<b>6</b> ORIGINAL PERIOD COVERED		Month Day Year 07/01/2024		Month Day Year THROUGH 12/31/2024	
				Receipt # Amount	
				Date Processed	
				Date Imaged	

**7 EXPLANATION OF CORRECTION**  
The Treasurer is not being terminated.

**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.

Tena Oates  
\_\_\_\_\_  
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**

# GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC  
COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00087838	2 Total pages filed: 29
3 COMMITTEE NAME Democratic Club of Polk County			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 06/03/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3626 US Hwy 190W Livingston, TX 77351		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Tena R. NICKNAME LAST SUFFIX Oates		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 431 West Lake Shore Livingston, TX 77351		
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 431 West Lake Shore Livingston, TX 77351		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (281) 433-0325		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year 07/01/2024 THROUGH Month Day Year 12/31/2024		
11 ELECTION	ELECTION DATE Month Day Year 11/05/2024 ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		

GO TO PAGE 2

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**  
COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Democratic Club of Polk County		<b>13 Filer ID</b> (Ethics Commission Filers) 00087838
<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 Democrat
		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> <input checked="" type="checkbox"/> check here if this report qualifies for the higher itemization threshold
<b>EXPENDITURE TOTALS</b>	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,735.00
	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
<b>CONTRIBUTION BALANCE</b>	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 23,574.55
	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 6,371.11
<b>OUTSTANDING LOAN TOTALS</b>	<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.

Ms. Tena R. Oates

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

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM **GPAC**  
**ADDENDUM**

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<b>12 COMMITTEE NAME</b> Democratic Club of Polk County	<b>13 Filer ID</b> (Ethics Commission Filers) 00087838
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<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 Democrat
		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>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 Democrat
		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.)	

**SUBTOTALS - GPAC****FORM GPAC**  
**COVER SHEET PG 3**  
5 of 29

<b>17 COMMITTEE NAME</b> Democratic Club of Polk County		<b>18 Filer ID</b> (Ethics Commission Filers) 00087838
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,735.00
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	\$ 23,574.55
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 checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 9,447.42
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>		<b>1</b> Total pages Schedule A1: Sch: 1/11 Rpt: 6/29
<b>2</b> FILER NAME Democratic Club of Polk County		<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 12/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bencomo, Ida <hr/> <b>6</b> Contributor address; City; State; Zip Code  Livingston, TX 77351	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burr, Richard <hr/> Contributor address; City; State; Zip Code  Leggett, TX 77350	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burr, Richard <hr/> Contributor address; City; State; Zip Code  Leggett, TX 77350	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 10/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burr, Richard <hr/> Contributor address; City; State; Zip Code  Leggett, TX 77350	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burr, Richard <hr/> Contributor address; City; State; Zip Code  Leggett, TX 77350	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/11 Rpt: 7/29
<b>2</b> FILER NAME Democratic Club of Polk County		<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 12/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burr, Richard <hr/> <b>6</b> Contributor address; City; State; Zip Code  Leggett, TX 77350	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) none
Date 10/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catilleja, Maria <hr/> Contributor address; City; State; Zip Code  L, TX 77351	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Owner
Date 07/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Barbara (Miss) <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 08/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Barbara (Miss) <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diderich, Ron <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/11 Rpt: 8/29
<b>2</b> FILER NAME Democratic Club of Polk County		<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 07/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuentes, Connie (Mrs.) <b>6</b> Contributor address; City; State; Zip Code  Livin, TX 77351	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Welder		<b>9</b> Employer (See Instructions) Self-employed
Date 08/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuentes, Connie (Mrs.) Contributor address; City; State; Zip Code  Livin, TX 77351	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Welder		Employer (See Instructions) Self-employed
Date 09/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuentes, Connie (Mrs.) Contributor address; City; State; Zip Code  Livin, TX 77351	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Welder		Employer (See Instructions) Self-employed
Date 10/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuentes, Connie (Mrs.) Contributor address; City; State; Zip Code  Livin, TX 77351	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Welder		Employer (See Instructions) Self-employed
Date 11/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuentes, Connie (Mrs.) Contributor address; City; State; Zip Code  Livin, TX 77351	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Welder		Employer (See Instructions) Self-employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/11 Rpt: 9/29
<b>2</b> FILER NAME Democratic Club of Polk County		<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 12/03/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuentes, Connie (Mrs.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Livin, TX 77351	<b>7</b> Amount of Contribution (\$)  \$20.00
<b>8</b> Principal occupation / Job title (See Instructions) Welder		<b>9</b> Employer (See Instructions) Self-employed
Date 09/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Debra <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Laura <hr/> Contributor address; City; State; Zip Code  Coldspring, TX 77331	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) None
Date 08/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Laura <hr/> Contributor address; City; State; Zip Code  Coldspring, TX 77331	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) None
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Laura <hr/> Contributor address; City; State; Zip Code  Coldspring, TX 77331	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) None

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/11 Rpt: 10/29
<b>2</b> FILER NAME Democratic Club of Polk County		<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 10/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Laura <hr/> <b>6</b> Contributor address; City; State; Zip Code  Coldspring, TX 77331	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) Realtor		<b>9</b> Employer (See Instructions) None
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Laura <hr/> Contributor address; City; State; Zip Code  Coldspring, TX 77331	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) None
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Laura <hr/> Contributor address; City; State; Zip Code  Coldspring, TX 77331	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) None
Date 07/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Robbie <hr/> Contributor address; City; State; Zip Code  Li, TX 77351	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 08/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Robbie <hr/> Contributor address; City; State; Zip Code  Li, TX 77351	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/11 Rpt: 11/29
<b>2</b> FILER NAME Democratic Club of Polk County		<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 09/04/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Robbie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Li, TX 77351	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) retired		<b>9</b> Employer (See Instructions) retired
Date 11/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medlow, Lourene <hr/> Contributor address; City; State; Zip Code  Onalaska, TX 77360	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medlow, Lourene <hr/> Contributor address; City; State; Zip Code  Onalaska, TX 77360	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oates, Tena (Ms.) <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peake, Karen (Ms.) <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/11 Rpt: 12/29
<b>2</b> FILER NAME Democratic Club of Polk County		<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 08/07/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peake, Karen (Ms.) <hr/> <b>6</b> Contributor address; City; State; Zip Code  Livingston, TX 77351	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
Date 09/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peake, Karen (Ms.) <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peake, Karen (Ms.) <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 11/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peake, Karen (Ms.) <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peake, Karen (Ms.) <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/11 Rpt: 13/29
<b>2</b> FILER NAME Democratic Club of Polk County		<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 07/02/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, J.Scott <hr/> <b>6</b> Contributor address; City; State; Zip Code  Livingston, TX 77351	<b>7</b> Amount of Contribution (\$)  \$80.00
<b>8</b> Principal occupation / Job title (See Instructions) realtor		<b>9</b> Employer (See Instructions) owner
Date 07/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Jackie <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 08/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Jackie <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 09/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Jackie <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 10/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Jackie <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/11 Rpt: 14/29
<b>2</b> FILER NAME Democratic Club of Polk County		<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 11/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Jackie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Livingston, TX 77351	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions) NA
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Jackie <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 12/07/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turney, Ernie (Mr.) <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turney, Ernie (Mr.) <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) NA
Date 07/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) VanBemmelen, Robert <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$80.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/11 Rpt: 15/29
<b>2</b> FILER NAME Democratic Club of Polk County		<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 07/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Willie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Livingston, TX 77351	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions) City Tires
Date 08/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Willie <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) City Tires
Date 09/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Willie <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) City Tires
Date 10/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Willie <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) City Tires
Date 11/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Willie <hr/> Contributor address; City; State; Zip Code  Livingston, TX 77351	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions) City Tires

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/11 Rpt: 16/29
<b>2</b> FILER NAME Democratic Club of Polk County		<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 12/06/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, Willie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Livingston, TX 77351	<b>7</b> Amount of Contribution (\$)  \$25.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions) City Tires



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/5 Rpt: 17/29	<b>2</b> FILER NAME Democratic Club of Polk County	<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 10/31/2024	<b>5</b> Payee name Bischoff, Carolyn	
<b>6</b> Amount (\$) \$101.55  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1276 3626 Hwy 190W Livingston, TX 77351	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<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 Tacos for Open House for 2024 election
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/11/2024	Payee name Bruning, Tom	
Amount (\$) \$200.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 315 Jackson Street Livingston, TX 77351	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<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 Larger Meeting Venue for Club
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/30/2024	Payee name Democratic Party of Polk County	
Amount (\$) \$5,000.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3628 US HWY 190 W Livingston, TX 77351	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Donation from club to county party for election	<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 Donation made for Party Expenses during upcoming election
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/5 Rpt: 18/29	<b>2</b> FILER NAME Democratic Club of Polk County	<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 11/18/2024	<b>5</b> Payee name McDonald, Ann	
<b>6</b> Amount (\$) \$972.50  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code PO Box 1276 3626 Hwy 190W Livingston, TX 77351	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<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 Newspaper ads for 2024 election
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/16/2024	Candidate/Officeholder name Office sought Office held	
Payee name Oates, Tena		
Amount (\$) \$898.50  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 431 W. Lake Shore Dr Livingston, Texas 77351 Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense newspaper ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/29/2024	Candidate/Officeholder name Office sought Office held	
Payee name Thomas, Jackie		
Amount (\$) \$3,335.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1276 3626 Hwy 190W Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Billboards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/5 Rpt: 19/29	<b>2</b> FILER NAME Democratic Club of Polk County	<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 07/03/2024	<b>5</b> Payee name Turney, Ann	
<b>6</b> Amount (\$) \$3,350.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 1272 Old Woodville Rd Livingston, TX 77351	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<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 Venue Rental
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/01/2024	Payee name White, Willie	
Amount (\$) \$1,340.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3626 US Hwy 190 Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing for June Celebration
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/23/2024	Payee name White, Willie	
Amount (\$) \$2,433.00  <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3626 US Hwy 190 Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Billboards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**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)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/5 Rpt: 20/29	<b>2</b> FILER NAME Democratic Club of Polk County	<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 09/09/2024	<b>5</b> Payee name White, Willie	
<b>6</b> Amount (\$) \$840.00  <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee address; City; State; Zip Code 3626 US Hwy 190  Livingston, TX 77351	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<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 Newspaper Ads for 2024 Election
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/30/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1,858.00  <input type="checkbox"/> Expenditure from corporate funds	Payee name White, Willie  Payee address; City; State; Zip Code 3626 US Hwy 190  Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Newspaper ads for 2024 Election
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/21/2024	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1,164.00  <input type="checkbox"/> Expenditure from corporate funds	Payee name White, Willie  Payee address; City; State; Zip Code 3626 US Hwy 190  Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political ads for 2024 election
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 21/29	2 FILER NAME Democratic Club of Polk County	3 Filer ID (Ethics Commission Filers) 00087838
4 Date 11/08/2024	5 Payee name White, Willie	
6 Amount (\$) \$2,082.00  <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 3626 US Hwy 190  Livingston, TX 77351	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense newspaper ads for 2024 election
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought  Office held

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 1/8 Rpt:	<b>2</b> FILER NAME Democratic Club of Polk County	<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 08/13/2024	<b>5</b> Payee name Boyce, Katie	
<b>6</b> Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip 3626 190W 3626 Hwy 190W Livingston, TX 77351	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Scholarship
Date 08/22/2024	Payee name Chitty, Anastasia	
Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 1276 3626 Hwy 190W Livingston, TX 77351	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Scholarship
Date 08/07/2024	Payee name Correga, Mary	
Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3626 190W Livingston, TX 77351	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Scholarship
Date 08/20/2024	Payee name Duff, Mary	
Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 1276 3626 Hwy 190W Livingston, TX 77351	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Scholarship

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 2/8 Rpt:	<b>2</b> FILER NAME Democratic Club of Polk County	<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 08/20/2024	<b>5</b> Payee name Duff, Mary	
<b>6</b> Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip PO Box 1276 3626 Hwy 190W Livingston, TX 77351	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Scholarship
Date 07/16/2024	Payee name Eastex Telephone	
Amount (\$) 117.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 150 Livingston, TX 77351	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Telephone - Monthly
Date 08/19/2024	Payee name Eastex Telephone	
Amount (\$) 117.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 150 Livingston, TX 77351	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Telephone and Internet - HQ
Date 11/18/2024	Payee name Eastex Telephone Co	
Amount (\$) 45.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 150 Livingston, TX 77351	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) HQ - Telephone

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 3/8 Rpt:	<b>2</b> FILER NAME Democratic Club of Polk County	<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 12/16/2024	<b>5</b> Payee name Eastex Telephone Co	
<b>6</b> Amount (\$)  117.18 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip PO Box 150  Livingston, TX 77351	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) HQ - Telephone and Internet
Date 12/02/2024	Payee name Gellar, Faith	
Amount (\$)  500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 1276 3626 Hwy 190W Livingston, TX 77351	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Scholarship
Date 08/20/2024	Payee name Gonzalez, Bryan	
Amount (\$)  500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3626 190W  Livingston, TX 77351	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Scholarship
Date 08/02/2024	Payee name Gunnels, Chekea	
Amount (\$)  500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3626 190 W  Livingston, TX 77351	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Scholarship



# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 4/8 Rpt:	2 FILER NAME Democratic Club of Polk County	3 Filer ID (Ethics Commission Filers) 00087838
4 Date 08/05/2024	5 Payee name Jack White Enterprises	
6 Amount (\$) 750.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 252 Jo Ann Trail  Livingston, TX 77351	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) HQ rental
Date 09/06/2024	Payee name Morgan, Latrina	
Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 1276 3626 Hwy 190W Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) Scholarship
Date 10/11/2024	Payee name Oates, Tena	
Amount (\$) 168.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 431 W. Lake Shore Dr Livingston, Texas 77351 Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Zoom Meeting license
Date 10/18/2024	Payee name Polk County Chamber of Commerce	
Amount (\$) 145.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 1001 US 59 Loop N  Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Hometown Christmas

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 5/8 Rpt:	<b>2</b> FILER NAME Democratic Club of Polk County	<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 07/24/2024	<b>5</b> Payee name Sam Houston Electric Coop	
<b>6</b> Amount (\$) 42.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip PO Box 426  Livingston, TX 77351	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Electricity for HQ
Date 08/20/2024	Payee name Sam Houston Electric Coop	
Amount (\$) 46.87 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 426  Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) HQ-Electricity
Date 09/18/2024	Payee name Sam Houston Electric Coop	
Amount (\$) 53.89 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 426  Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) HQ Electricitu
Date 10/16/2024	Payee name Sam Houston Electric Coop	
Amount (\$) 48.77 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 426  Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) HQ - Electricity

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule I: Sch: 6/8 Rpt:	<b>2</b> FILER NAME Democratic Club of Polk County	<b>3</b> Filer ID (Ethics Commission Filers) 00087838
<b>4</b> Date 11/14/2024	<b>5</b> Payee name Sam Houston Electric Coop	
<b>6</b> Amount (\$) 45.00 <input type="checkbox"/> Expenditure from corporate funds	<b>7</b> Payee Address; City; State; Zip PO Box 426  Livingston, TX 77351	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) HQ - Electricity
Date 12/13/2024	Payee name Sam Houston Electric Coop	
Amount (\$) 38.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 426  Livingston, TX 77351	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	<b>(b)</b> Description (See instructions regarding type of information required.) HQ-Electricity
Date 08/13/2024	Payee name Saucier, Kelli	
Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3626 190W  Livingston, TX 77351	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Scholarship
Date 09/09/2024	Payee name Saunders, Katlynn	
Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 1276 3626 Hwy 190W Livingston, TX 77351	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	<b>(b)</b> Description (See instructions regarding type of information required.) Scholarship

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 7/8 Rpt:	2 FILER NAME Democratic Club of Polk County	3 Filer ID (Ethics Commission Filers) 00087838
4 Date 08/30/2024	5 Payee name Thompson, Cornyn	
6 Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip PO Box 1276 3626 Hwy 190W Livingston, TX 77351	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) Scholarship
Date 09/16/2024	Payee name Ward, Jacob	
Amount (\$) 500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip PO Box 1276 3626 Hwy 190W Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) Scholarship
Date 12/23/2024	Payee name White, Willie	
Amount (\$) 70.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3626 US Hwy 190 Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Christmas Festival booth
Date 12/13/2024	Payee name White, Willie	
Amount (\$) 643.71 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3626 US Hwy 190 Livingston, TX 77351	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Calendar and Business Cards

# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 8/8 Rpt:	2 FILER NAME Democratic Club of Polk County	3 Filer ID (Ethics Commission Filers) 00087838
4 Date 09/12/2024	5 Payee name Wooten, Natalie	
6 Amount (\$)  500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip PO Box 1276 3626 Hwy 190W Livingston, TX 77351	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Gift/Awards/Memorials Expense	(b) Description (See instructions regarding type of information required.) Scholarship