

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) 00086720		2 Total pages filed: 10	
3 COMMITTEE NAME GarverUSA PAC				OFFICE USE ONLY Date Received ELECTRONICALLY FILED 06/04/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 28 Liberty Ship Way Suite 2815 Sausalito, CA 94965				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Ms. Jennie NICKNAME LAST SUFFIX Skelton				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 28 Liberty Ship Way, Suite 2815 Sausalito , CA 94965				
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 28 Liberty Ship Way, Suite 2815 Sausalito , CA 94965				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (415) 903-2800				
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)				
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input checked="" type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5				
11 PERIOD COVERED	Month Day Year THROUGH Month Day Year 04/26/2025 05/25/2025				

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME GarverUSA PAC		13 Filer ID (Ethics Commission Filers) 00086720
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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.)	
	15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,020.94
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 12,596.49
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 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. Jennie Skelton

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - MPAC**FORM MPAC**
COVER SHEET PG 3
3 of 10

17 COMMITTEE NAME GarverUSA PAC		18 Filer ID (Ethics Commission Filers) 00086720
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,020.94
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 type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 256.00
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	\$ 275.50
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/10
2 FILER NAME GarverUSA PAC		3 Filer ID (Ethics Commission Filers) 00086720
4 Date 05/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, John 6 Contributor address; City; State; Zip Code Austin, TX 78727	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Engineer		9 Employer (See Instructions) Garver, LLC
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benton, John Contributor address; City; State; Zip Code Austin, TX 78727	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Garver, LLC
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Debra Contributor address; City; State; Zip Code North Little Rock, AR 72116	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Benefit Manager		Employer (See Instructions) Garver, LLC
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Debra Contributor address; City; State; Zip Code North Little Rock, AR 72116	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Benefit Manager		Employer (See Instructions) Garver, LLC
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Robert Contributor address; City; State; Zip Code Birmingham, AL 35242	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Professional Engineer		Employer (See Instructions) Garver, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/10
2 FILER NAME GarverUSA PAC		3 Filer ID (Ethics Commission Filers) 00086720
4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carr, Robert <hr/> 6 Contributor address; City; State; Zip Code Birmingham, AL 35242	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Professional Engineer		9 Employer (See Instructions) Garver, LLC
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Robert <hr/> Contributor address; City; State; Zip Code Madison, WI 53717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Director, Government Relations		Employer (See Instructions) Garver, LLC
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, Robert <hr/> Contributor address; City; State; Zip Code Madison, WI 53717	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Director, Government Relations		Employer (See Instructions) Garver, LLC
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinges, Andrew <hr/> Contributor address; City; State; Zip Code Huntsville, AL 35802	Amount of Contribution (\$) \$38.47
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) Garver, LLC
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinges, Andrew <hr/> Contributor address; City; State; Zip Code Huntsville, AL 35802	Amount of Contribution (\$) \$38.47
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) Garver, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/10
2 FILER NAME GarverUSA PAC		3 Filer ID (Ethics Commission Filers) 00086720
4 Date 05/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graves, Michael <hr/> 6 Contributor address; City; State; Zip Code Norman, OK 73072	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Garver, LLC
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Patrick <hr/> Contributor address; City; State; Zip Code Wichita, KS 67235	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Construction Coordinator		Employer (See Instructions) Garver, LLC
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herman, Patrick <hr/> Contributor address; City; State; Zip Code Wichita, KS 67235	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Construction Coordinator		Employer (See Instructions) Garver, LLC
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howington, Michelle <hr/> Contributor address; City; State; Zip Code Madison, MS 39110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) Garver, LLC
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howington, Michelle <hr/> Contributor address; City; State; Zip Code Madison, MS 39110	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Civil Engineer		Employer (See Instructions) Garver, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/10
2 FILER NAME GarverUSA PAC		3 Filer ID (Ethics Commission Filers) 00086720
4 Date 05/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Blake 6 Contributor address; City; State; Zip Code Tupelo, MS 38801	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Project Manager		9 Employer (See Instructions) Garver, LLC
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palmer, Blake Contributor address; City; State; Zip Code Tupelo, MS 38801	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Garver, LLC
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parks, Wade Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Garver, LLC
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sallee, Jenny Contributor address; City; State; Zip Code Tulsa, OK 74133	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Transportation Team Leader		Employer (See Instructions) Garver, LLC
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Anita Contributor address; City; State; Zip Code North Little Rock, AR 72118	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) External Comm. Team Leader		Employer (See Instructions) Garver, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/10
2 FILER NAME GarverUSA PAC		3 Filer ID (Ethics Commission Filers) 00086720
4 Date 05/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Anita <hr/> 6 Contributor address; City; State; Zip Code North Little Rock, AR 72118	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) External Comm. Team Leader		9 Employer (See Instructions) Garver, LLC
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spann, Quinn <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sr. Project Manager		Employer (See Instructions) Garver, LLC
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spann, Quinn <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sr. Project Manager		Employer (See Instructions) Garver, LLC
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Michael <hr/> Contributor address; City; State; Zip Code Madison, MS 39110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Project Engineer		Employer (See Instructions) Garver, LLC
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells, Michael <hr/> Contributor address; City; State; Zip Code Madison, MS 39110	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Project Engineer		Employer (See Instructions) Garver, LLC

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F2: Sch: 1/1 Rpt: 9/10	2 FILER NAME GarverUSA PAC	3 Filer ID (Ethics Commission Filers) 00086720
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$
5 Date 05/25/2025	6 Payee name Politicom Law LLP	
7 Amount (\$) \$256.00 <input type="checkbox"/> Expenditure from corporate funds	8 Payee address; City; State; Zip Code 28 Liberty Ship Way, Suite 2815 Sausalito, CA 94965	
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input checked="" type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal & Reporting Services
11 Complete <u>ONLY</u> 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.

1 Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME GarverUSA PAC	3 Filer ID (Ethics Commission Filers) 00086720
4 Date 05/06/2025	5 Payee name Politicom Law LLP	
6 Amount (\$) 275.50 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 28 Liberty Ship Way, Suite 2815 Sausalito, CA 94965	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Legal Services	(b) Description (See instructions regarding type of information required.) Legal & Reporting Services