#### 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) 00040978 3 COMMITTEE NAME **OFFICE USE ONLY** Capital Area Progressive Democrats Date Received **ELECTRONICALLY FILED** 07/08/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 413 Date Hand-delivered or Date Postmarked Austin, TX 78767 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Allison G. NAME NICKNAME LAST **SUFFIX** Heinrich STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 13400 Briarwick Drive STREET **ADDRESS** Unit 1705 (Residence or Business) Austin, TX 78729 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 13400 Briarwick Drive MAILING **ADDRESS** Unit 1705 Austin, TX 78729 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 297-1650 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 Primary Runoff Other General Special **GO TO PAGE 2**

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

## FORM **GPAC** COVER SHEET PG 2

L2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Capital Area Progressiv	ve Democrats			00040978	
4 COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)	л. Зарропеч			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
E CONTRIBUTION	1	DOLITICAL CONTRIBUTIO	NS (OTHER THAN	<u> </u>	
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	DIVICAL CONTRIBUTION  OR GUARANTEES OF LOAN  ADE ELECTRONICALLY)  qualifies for the higher itemization	NS, OR	\$	0.00
	2. TOTAL POLITICA	L CONTRIBUTIONS		\$	44.00
	(OTHER THAN PLE	DGES, LOANS, OR GUARAI	NTEES OF LOANS)	ľ	44.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	) POLITICAL EXPENDITURE	ES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES		\$	263.53
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAIN G PERIOD	ED AS OF THE LAST	DAY \$	7,143.85
OUTSTANDING LOAN TOTALS	•	AMOUNT OF ALL OUTSTAN REPORTING PERIOD	DING LOANS AS OF T	THE \$	0.00
6 AFFIDAVIT	<u> </u>				
		true and correc	rm, under penalty of pe ct and includes all inform Election Code.		accompanying report is d to be reported by me
			AU: 0		
				Heinrich	
			Signature of Car	npaign Freasu	irer
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	before me, by the said		, th	nis the	day
		vhich, witness my hand and s			-
Signature of officer ad	ministering oath	Printed name of officer admir	nistering oath	Title of office	cer administering oath

## **SUBTOTALS - GPAC**

## FORM GPAC COVER SHEET PG 3

					3 of 12
<b>17</b> COI	MMITTE	EE NAME	18 Filer ID	(Ethics Commission	n Filers)
Cap	pital Ar	ea Progressive Democrats	00040978		
<b>19</b> SCI	HEDULI		T		
	ME OF	SUBTOTAL A	MOUNT		
				+	
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	44.00
				<del> </del>	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
				ļ <sup>.</sup>	
3.	П	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
	<u> </u>			<u> </u>	
		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO	DR		
4.	Ш	ORGANIZATION		\$	
		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR	†	
5.	Ш	LABOR ORGANIZATION	THOIR OIL	\$	
				1	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
				ļ.	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR		\$	
		ORGANIZATION			
		CONTRACTOR OF TRACTOR CONTRIBUTIONS FROM CORPORATION OF LABOR		T <sub>.</sub>	
8.	Ш	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	
				+	
9.		SCHEDULE E: LOANS		\$	
				<u> </u>	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	263.53
				ļ*	
11		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			
11.	Ш	SCHEDULE FZ. UNPAID INCURRED OBLIGATIONS		\$	
				†	
12.	Ш	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
				1	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
				ļ ·	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
	Ц_			Ψ	
15		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	RETURNED	Ţ	2.60
15.	X	TO FILER		\$	3.68
1					

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	<b>■ A1</b>
	The Instru	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 1/1 Rpt: 4/12	
2	FILER NAME Capital Area Progressive Democrats		3	Filer ID (Ethics Commission 00040978	Filers)	
4	Date 05/15/2025  5 Full name of contributor out-of-state PAC (ID#:)  Jeffers, Tanisa (The Honorable)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$11.00	
		Austin, TX 78730				
8	Justice of the	pation / Job title (See Instructions) e Peace	9 Employer (See Instructions Travis County	5)		
	Date 06/26/2025	Full name of contributor out-of-state PAC (ID#:_ Marzullo, Amanda Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$11.00
	Principal occu	Austin, TX 78756 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Attorney Austin Community Law			nter		
	Date 06/26/2025	Full name of contributor out-of-state PAC (ID#: McGivern, Brian Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$11.00
		Austin, TX 78756				
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Austin Community Law		nter	
	Date 06/17/2025	Full name of contributor out-of-state PAC (ID#:_ Parks, Ciara Contributor address; City; State; Zip Code  Manor, TX 78653			Amount of Contribution (\$)	\$11.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Texas Board of Law Exa		ners	

## 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

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

Candidate/Officeholder/Politica Credit Card Payment	Committee   Legal Services   Salaries/Wages/Contract Labor   OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/6 Rpt: 5/12	Capital Area Progressive Democrats 00040978
4 Date	5 Payee name
05/18/2025	ActBlue
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$0.44	P.O. Box 441156
Expenditure from corporate funds	Somerville, MA 02144
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Accounting/Banking  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Credit card processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/22/2025	ActBlue
Amount (\$)	Payee address; City; State; Zip Code
\$0.44	P.O. Box 441156
Expenditure from corporate funds	Somerville, MA 02144
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Credit card processing fees
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payao namo
06/29/2025	Payee name ActBlue
Amount (\$)	Payee address; City; State; Zip Code
\$0.88	P.O. Box 441156
Expenditure from corporate funds	Somerville, MA 02144
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Credit card processing fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

Advertising Expense Ev Accounting/Banking Fer Consulting Expense For Contributions/ Ontations Made By - Gif

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

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: 2/6 Rpt: 6/12	Capital Area Progressive Democrats 00040978
4 Date	5 Payee name
01/02/2025	Capitol Credit Union
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3.99	P.O. Box 81649
Expenditure from corporate funds	Austin, TX 78708
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Bank fees
	Baill 1888
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
02/03/2025	Capitol Credit Union
Amount (\$)	Payee address; City; State; Zip Code
\$3.99	P.O. Box 81649
ψ3.99	F.O. BOX 01049
Expenditure from corporate funds	Austin, TX 78708
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Bank fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
03/03/2025	Capitol Credit Union
Amount (\$)	Payee address; City; State; Zip Code
\$3.99	P.O. Box 81649
Expenditure from corporate funds	Austin, TX 78708
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
LA LABITORE	Check if Austin, TX, officeholder living expense
	Bank fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

## POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

### SCHEDULE F1

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

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

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

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: 3/6 Rpt: 7/12	Capital Area Progressive Democrats 00040978
4 Date	5 Payee name
04/01/2025	Capitol Credit Union
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$3.99	P.O. Box 81649
Expenditure from corporate funds	Austin, TX 78708
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Bank fees
	Dailk ICCS
O Complete ONLY if alice -	Candidate/Officeholder name Office acusht
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	
Date	Payee name
05/01/2025	Capitol Credit Union
Amount (\$)	Payee address; City; State; Zip Code
\$3.99	P.O. Box 81649
Expenditure from corporate funds	Austin, TX 78708
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Bank fees
	Dalik lees
Operation ONE Wife discont	Our did to 10 ff as had done as many
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	
Date	Payee name
06/03/2025	Capitol Credit Union
Amount (\$)	Payee address; City; State; Zip Code
\$3.99	P.O. Box 81649
Expenditure from corporate funds	Austin, TX 78708
PURPOSE	
OF PURPOSE	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Accounting/Banking
	Bank fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	<b>⊣</b>

## 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 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
Transport in District Travel in District Travel Out of District
OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	nplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/6 Rpt: 8/12	Capital Area Progressive Democrats	00040978
4 Date	5 Payee name	
05/01/2025	Elementor	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$191.75	Tuval Street 40	
Expenditure from corporate funds	Ramat Gan 5252247 Israel	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Website
		vvobsito
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/OI		gric Office Held
Data		
Date	Payee name	
01/02/2025	Google LLC	
Amount (\$)	Payee address; City; State; Zip Co	de
\$7.68	1600 Amphitheatre Pkwy	
Expenditure from		
corporate funds	Mountain View, CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  GSuite
		Goulte
Complete ONLY if direct	Candidate/Officeholder name Office sou	aht Office held
expenditure to benefit C/OI		The Office field
<u> </u>	T _	
Date	Payee name	
02/02/2025	Google LLC	
Amount (\$)	Payee address; City; State; Zip Co	de
\$7.68	1600 Amphitheatre Pkwy	
Expenditure from		
corporate funds	Mountain View, CA 94043	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		GSuite
Commission ONUVIVIII	Condidate/Officeholder	Office 1-14
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou H	ght Office held
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## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
TTALE (Control of State Control of C

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: 5/6 Rpt: 9/12	Capital Area Progressive Democrats 00040978
4 Date	5 Payee name
03/02/2025	Google LLC
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$7.68	1600 Amphitheatre Pkwy
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense  GSuite
	GSuite
O Complete Chill V St. alia	Condidate/Officeholder name
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/02/2025	Google LLC
Amount (\$)	Payee address; City; State; Zip Code
\$7.68	1600 Amphitheatre Pkwy
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  GSuite
	Counte
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	
Date	Payee name
05/02/2025	Google LLC
Amount (\$)	Payee address; City; State; Zip Code
\$7.68	1600 Amphitheatre Pkwy
Evpanditure from	
Expenditure from corporate funds	Mountain View, CA 94043
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
LAFLINDITORE	Check if Austin, TX, officeholder living expense
	GSuite
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experientale to beliefft C/O	•

## POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

### SCHEDULE F1

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

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politice Credit Card Payment	y - Gif al Committee Le	od/Beverage Expense ft/Awards/Memorials Expense gal Services ne Instruction Guide explain	Polling Expense Printing Expense Salaries/Wages/Col		Travel in District Travel Out of Dist OTHER (enter a	trict category not listed above)
		ie instruction Guide explain	is now to complete			
1 Total pages Schedule F1: Sch: 6/6 Rpt: 10/12	1	Progressive Democrats		3	Filer ID 00040978	(Ethics Commission Filers)
4 Date	5 Payee name					
06/02/2025	Google LLC					
6 Amount (\$)	7 Payee address;	City; Stat	te; Zip Code			
\$7.68	1600 Amphith	eatre Pkwy				
Expenditure from corporate funds	Mountain Viev	v, CA 94043				
8 PURPOSE OF EXPENDITURE	(a) Category (See Office Overhe	Categories listed at the top of this s ad/Rental Expense		escription ] Check if travel outs ] Check if Austin, TX Suite		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Office H	holder name	Office sought		Office he	ld

## INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

### SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		ages Schedule K: ./2 Rpt: 11/12	
2	2 FILER NAME			Filer ID	(Ethics Commission F	-ilers)
	Capital Area Progressive Democrats			00040	978	
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
	01/01/2025	Capitol Credit Union				\$0.63
		6 Address of person from whom amount is received; City; State; Zip Code				,
		Address of person from whom amount is received, City, State, 21p code				
		Austin, TX 78708				
			if noliti	cal cont	I ribution returned to filer	
		Interest	ii politi	cai com	indution returned to file	
					T	
	Date	Name of person from whom amount is received			Amount (\$)	ФО СО
	02/01/2025	Capitol Credit Union				\$0.63
		Address of person from whom amount is received; City; State; Zip Code				
		Aughin TV 70700				
		Austin, TX 78708				
		<u> </u>	if politi	cal cont	ribution returned to filer	
		Interest			-	
	Date	Name of person from whom amount is received			Amount (\$)	
	03/01/2025	Capitol Credit Union				\$0.57
		Address of person from whom amount is received; City; State; Zip Code			]	
		Austin, TX 78708				
		<u> </u>	if politi	cal cont	ribution returned to filer	
		Interest				
	Date	Name of person from whom amount is received			Amount (\$)	
	04/01/2025	Capitol Credit Union				\$0.63
		Address of person from whom amount is received; City; State; Zip Code				
		Austin, TX 78708				
		Purpose for which amount is received	if politi	cal cont	ribution returned to filer	
		Interest				
	Date	Name of person from whom amount is received			Amount (\$)	
	05/01/2025	Capitol Credit Union				\$0.61
		Address of person from whom amount is received; City; State; Zip Code			1	
		Austin, TX 78708				
		Purpose for which amount is received	if politi	cal cont	ribution returned to filer	
		Interest				

# 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: 2/2 Rpt: 12/12 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Capital Area Progressive Democrats 00040978 5 Name of person from whom amount is received 8 Amount (\$) 06/01/2025 Capitol Credit Union \$0.61 6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78708 Purpose for which amount is received Check if political contribution returned to filer Interest