#### 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) 00088903 3 COMMITTEE NAME **OFFICE USE ONLY** Democrats of La Porte Date Received **ELECTRONICALLY FILED** 07/06/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 624 S 5th St Date Hand-delivered or Date Postmarked La Porte, TX 77571-5058 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Michael NAME NICKNAME LAST **SUFFIX** Maglitto STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 624 S. 5th Street STREET **ADDRESS** (Residence or Business) La Porte, TX 77571 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 624 S. 5th Street MAILING **ADDRESS** La Porte, TX 77571 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (832) 339-3554 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

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Democrats of La Port	e		00088903	
14 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.)			
		B. Opposed		
	3. Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	38.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	918.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	1,444.13
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	1,456.90
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	·		·	
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		Mr Micha	ıel Maglitto	
		Signature of Car		rer
AFFIX NOTAF	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said	, th	nis the	day
of	, 20, to certify	which, witness my hand and seal of office.		-
Signature of officer a	administering oath	Printed name of officer administering oath	Title of offic	er administering oath

## **SUBTOTALS - GPAC**

## FORM GPAC **COVER SHEET PG 3**

				3 of 13						
<b>17</b> COMMI	TEE NAME	18 Filer ID	(Ethics Cor	nmission Filers)						
Democ	rats of La Porte	00088903								
l	19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE									
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	918.00						
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$							
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	37.00						
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$							
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$							
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$							
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	!	\$							
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$							
9.	SCHEDULE E: LOANS		\$							
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	1,253.23						
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$							
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$							
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	190.90						
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$							
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$							

	MONET	ARY POLITICAL (	CONTRIBUTIO	N 			SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 1/3 Rpt: 4/13	
2	FILER NAME Democrats of	FILER NAME Democrats of La Porte					Filer ID (Ethics Commission 00088903	n Filers)
4	Date 06/08/2025			7	Amount of Contribution (\$)	\$285.00		
		La Porte, TX 77571						
8	Principal occu retired book	pation / Job title (See Instructions keeper	s)	9	Employer (See Instructions retired	5)		
	Date 06/13/2025	Full name of contributor Baird, Kristi Contributor address; City; S	out-of-state PAC (ID#:_ ate; Zip Code		)		Amount of Contribution (\$)	\$40.00
	Principal occu	La Porte, TX 77571 pation / Job title (See Instructions	;)		Employer (See Instructions	<u> </u>		
	Not Employe		,,		Not Employed	-,		
	Date 06/15/2025				Amount of Contribution (\$)	\$192.00		
		LaPorte, TX 77571						
	Principal occu Retired	pation / Job title (See Instructions	;)		Employer (See Instructions none	5)		
	Date 01/12/2025	Full name of contributor Ehlers, Earl Contributor address; City; S La Porte, TX 77571	out-of-state PAC (ID#:_		)		Amount of Contribution (\$)	\$150.00
	Principal occu retired	pation / Job title (See Instructions	s)		Employer (See Instructions retired	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 01/09/2025 Gosnell, Robert  Contributor address; City; State; Zip Code  La Porte, TX 77571		•	Amount of Contribution (\$)	\$25.00			
	Principal occu Not Employe	pation / Job title (See Instructions ed	s)		Employer (See Instructions Not Employed	s)		

	MONEI	ARY POLITICAL (	CONTRIBUTIO	N	S		SCHEDULI	<b>■ A1</b>
	The Instruc	ction Guide explains hov	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 5/13	
2	FILER NAME Democrats o	FILER NAME  Democrats of La Porte				3	Filer ID (Ethics Commission 00088903	ı Filers)
4	Date 03/11/2025  5 Full name of contributor out-of-state PAC (ID#:) Lange, Michael (Mr.)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$20.00			
8	Principal occu Director	Houston, TX 77096 pation / Job title (See Instructions	s)	9	Employer (See Instructions Ariel Holdings	<u> </u> 5)		
	Date 05/05/2025	Full name of contributor  Maglitto, Michael (Mr.)  Contributor address; City; S  La Porte, TX 77571	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$53.00
	Principal occu Retired	pation / Job title (See Instructions	s)		Employer (See Instructions Not Employed	<u>                                      </u>		
	Date Full name of contributor out-of-state PAC (ID#:)  03/09/2025 McCurry, Elizabeth  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00			
	Principal occu	La Porte, TX 77571 pation / Job title (See Instructions			Employer (See Instructions	;) 		
	retired		,		retired	,		
	Date 02/09/2025	Full name of contributor Mouton, Jill (Ms.) Contributor address; City; S	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$20.00
	Principal occu clerk	La Porte, TX 77571 pation / Job title (See Instructions	s)		Employer (See Instructions Harris County	<u> </u> ;)		
	Date Full name of contributor out-of-state PAC (ID#:)  04/13/2025 Parras, Eleanor (Ms.)  Contributor address; City; State; Zip Code  Kingwood, TX 77345			Amount of Contribution (\$)	\$25.00			
	Principal occu CSA	pation / Job title (See Instructions	s)		Employer (See Instructions United	5)		
_								

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDUL	E <b>A1</b>
	The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 3/3 Rpt: 6/13	
2	FILER NAME Democrats of La Porte	3	Filer ID (Ethics Commission 00088903	n Filers)
4	Date 02/28/2025  5 Full name of contributor out-of-state PAC (ID#:) Shotwell, Alyssa (Ms.)  6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$)	\$20.00
	TX, TX 77571			
8	Principal occupation / Job title (See Instructions)  9 Employer (See Instructions)  teacher  LPISD	ions)		
	Date   Full name of contributor		Amount of Contribution (\$)	\$25.00
	Principal occupation / Job title (See Instructions)  Employer (See Instructions)  retired  none	ions)		

PLEDO	GED CONTRIBUT	IONS			SCHEDULE B
The	Instruction Guide expla	ins how to comple	te this form.	1 Total pages Sched Sch: 1/1 Rpt: 7/	
2 FILER NAM Democrats	E of La Porte	3 Filer ID (Eth 00088903	ics Commission Filers)		
4	F UNITEMIZED PLEDGE	\$	0.00		
5 Date	6 Full name of pledgor Baird, Kristi (Ms.)	out-of-state PAC (ID#:_		8 Amount of pledge (\$)	9 In-kind description (If applicable)
06/13/2025	7 Pledgor Address;	City; State; Zip Code		\$5.00	\$5.00/month via Act Blue I
	La Porte, TX 77571			Check if travel outs	I I iide of Texas. Complete Schedule T.
	cupation / Job title (See Instructi tive assistant	ons)	11 Employer (See Instru	uctions)	
5 Date	6 Full name of pledgor Duncan, Kathleen (Ms.)	out-of-state PAC (ID#:_	)	8 Amount of pledge (\$) \$32.00	9 In-kind description (If applicable) \$32.00/month via
06/15/2025	7 Pledgor Address;	City; State; Zip Code		\$32.00	ActBlue
	La Porte, TX 77571		T	<u> </u>	; ide of Texas. Complete Schedule T.
	cupation / Job title (See Instructi tive assistant	ons)	11 Employer (See Instruertired	uctions)	

## POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

### SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District
OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to c	complet	te this form.
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 1/4 Rpt: 8/13	Democrats of La Porte		00088903
4 Date	5 Payee name		·
05/09/2025	Amazon		
6 Amount (\$)	7 Payee address; City; State; Zip C	Code	
\$49.64	440 Terry Ave		
Expenditure from corporate funds	Seattle, WA 98109		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Credit Card Payment		Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE		[	Check if Austin, TX, officeholder living expense
			parade decorations
O Commission ONLL V if disease	Condidate Office helder nove		Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so H	ougni	Office held
Date	Payee name		
03/30/2025	Bayshore Chamber of Commerce		
Amount (\$)	Payee address; City; State; Zip C	Code	
\$104.33	100 W. Main St.		
Expenditure from			
corporate funds	La Porte, TX 77571		
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			booth rental at Sylvan Beach Day
Complete ONLY if direct	Candidate/Officeholder name Office so	 ought	Office held
expenditure to benefit C/O		Ü	
Date	Payee name		
01/13/2025	City of La Porte		
Amount (\$)	Payee address; City; State; Zip C	Code	
\$150.00	604 West Fairmont Pkwy.	Jouc	
+200.00			
Expenditure from corporate funds	La Porte, TX 77571		
PURPOSE		(h)	Description
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(0)	Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Onice Overneau/Nental Expense	li	Check if Austin, TX, officeholder living expense
			Rental for club meetings
Complete ONLY if direct	Candidate/Officeholder name Office so	ought	Office held
expenditure to benefit C/OI	п 		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Legal Services	·		ages	s/Contract Labor		Travel Out of Dis OTHER (enter a	trict category not listed above)	
_			The Instruction G	uide explains	now to cor	npie	ete this form.	_		/= a =	\
1	Total pages Schedule F1:	l						3	Filer ID	(Ethics Commission F	ilers)
	Sch: 2/4 Rpt: 9/13	Demo	crats of La Porte						00088903		
4	Date	<b>5</b> Payee	name								
	02/11/2025	City of	f La Porte								
6	Amount (\$)	<b>7</b> Payee	address; City;	State:	Zip Co	de					
•	\$75.00	1	est Fairmont Pkwy.	Otato,	p						
	Ψ13.00	004 11	restrainment rivy.								
Г	Expenditure from	La Po	rto TV 77571								
_	corporate funds	Laru	rte, TX 77571		<del></del>						
8	PURPOSE OF		ory (See Categories listed at		edule)	(b)	Description				
	EXPENDITURE	Office	Overhead/Rental Ex	pense					de of Texas. Com		
							rental for club		officeholder living	expense	
							Terital for Club	ווו כ	eeung		
9	Complete ONLY if direct expenditure to benefit C/O		te/Officeholder name	C	Office sou	ght			Office he	eld	
	Date	Payee	name								
	04/14/2025	City of	f La Porte								
	Amount (\$)	Pavee	address; City;	State:	Zip Co	de					
	\$75.00	l	/est Fairmont Pkwy.	Otato,	ip	uo					
	Ψ13.00	004 11	rest i allillolle i kwy.								
	Expenditure from corporate funds	La Po	rte, TX 77571								
	PURPOSE	(a) Catego	ory (See Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Overhead/Rental Ex				<b>=</b>		de of Texas. Com		
	LXI ENDITORE						ш		officeholder living	expense	
							rental for club	m	eeting		
	Complete ONLY if direct expenditure to benefit C/O		te/Officeholder name	C	Office sou	ght			Office he	eld	
	Date	Payee	name								
	05/05/2025	City of	f La Porte								
	Amount (\$)	Pavee	address; City;	State.	Zip Co	de					
	\$75.00	l '	/est Fairmont Pkwy.	Olulo,	21p 00	uc					
	Φ13.00	004 W	rest raiimont rkwy.								
_	Expenditure from										
	corporate funds	La Po	rte, TX 77571								
	PURPOSE	(a) Catego	Ory (See Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Overhead/Rental Ex				Check if travel	outsi	de of Texas. Com	olete Schedule T.	
	LAFENDITORE						ш		officeholder living	expense	
							rental of mee	tinç	g space		
	Complete ONLY if direct		te/Officeholder name	C	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	Н									

# 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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/4 Rpt: 10/13	Democrats of La Porte 00088903
4 Date	5 Payee name
06/09/2025	City of La Porte
6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 604 West Fairmont Pkwy.
Ψ100.00	oo4 west all month kwy.
Expenditure from corporate funds	La Porte, TX 77571
8 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 meeting space rental
	meeting space rental
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/01/2025	Family Dollar
Amount (\$)	Payee address; City; State; Zip Code
\$4.60	913 S. Broadway
Expenditure from corporate funds	La Porte, TX 77571
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  pens
	ports
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/04/2025	J & N Enterprises
Amount (\$)	Payee address; City; State; Zip Code
\$433.00	2519 Fairway Park Dr. Ste. 302
Expenditure from	
corporate funds	Houston, TX 77092
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
	purchase of 2 club banners
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 Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe 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

ent Solicitation/Fundraising Expense
se Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/4 Rpt: 11/13	Democrats of La Porte 00088903
4 Date	5 Payee name
06/23/2025	Kroger
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$16.17	1300 Fairmont Pkwy.
Expenditure from corporate funds	La Porte, TX 77571
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  candy for parade
	carrier for parade
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
5.	
Date	Payee name
06/23/2025	Sams Club
Amount (\$)	Payee address; City; State; Zip Code
\$90.42	155 W. El Dorado Blvd.
Evanditure from	
Expenditure from corporate funds	Friendswood, TX 77546
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
_/	Check if Austin, TX, officeholder living expense
	candy for parade
One make the ONII Wife diagram	Our didn't lotter had a marrie of the country of th
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
01/01/2025	Walmart
Amount (\$)	Payee address; City; State; Zip Code
\$30.07	9025 Spencer Hwy.
— Constantitude forms	
Expenditure from corporate funds	La Porte, TX 77571
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Credit Card Payment
LAFLINDITURE	Check if Austin, TX, officeholder living expense
	Items for club members
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
3.,50	•

### **EXPENDITURES MADE BY CREDIT CARD**

#### SCHEDULE F4

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

ng Expense Travel in Distr ing Expense Travel Out of ries/Wages/Contract Labor OTHER (ente

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica	-	ces Salaruction Guide explains how		THER (enter a category no	ot listed ab	oove)
1	Total pages Schedule F4:		, , , , , , , , , , , , , , , , , , ,		3 Filer ID (Ethics 0	nmmiss	ion Filers)
	Sch: 1/2 Rpt: 12/13	Democrats of La Po	orte		00088903	5011111133	ion i liers)
	CREDIT CARD ISSUER		ncial institution f Texas	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
	Expenditure from corporate funds	\$30.07	01/01/2025				
7	PAYEE	(a) Payee name Walmart		(b) Payee address; 9025 Spencer Hwy. La Porte, TX 77571	City,	State,	Zip Code
8	PURPOSE OF	(a) Category		(b) Description			
O	EXPENDITURE	(See Categories listed at the top	of this schedule)	items for club party/meetir	20		
	_	Food/Beverage Expe	nse	l items for club party/meetii	ig		
	X Political						
	Non-Political	· · -	of Texas. Complete Schedule T.		officeholder living expens	se	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
ex	penditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
	Expenditure from corporate funds	\$4.60	05/01/2025				
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
		Family Dollar		913 S. Broadway			
				La Porte, TX 77571			
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schoolule)	(b) Description			
	EXPENDITURE	Advertising Expense	of this scriedule)	pens			
	X Political						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	ie	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
ex	penditure to benefit C/OH						
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
	Expenditure from corporate funds	\$49.64	05/10/2025				
	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
				440 Terry Ave			
		Amazon					
				Seattle, WA 98109			
	PURPOSE OF	(a) Category		(b) Description			
	EXPENDITURE	(See Categories listed at the top	of this schedule)	items for July 4 parade			
	X Political	Advertising Expense					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expens	e	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
ex	penditure to benefit C/OH						

### **EXPENDITURES MADE BY CREDIT CARD**

#### SCHEDULE F4

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

	Candidate/Onicendide//Fonitica	· ·	ruction Guide explains how	-	TILK (enter a category not listed a	.bove)
1	Total pages Schedule F4:		·	·	3 Filer ID (Ethics Commis	sion Filers)
	Sch: 2/2 Rpt: 13/13	Democrats of La Po	orte		00088903	,
4	CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid	
	Expenditure from corporate funds	\$90.42	06/23/2025			
7	PAYEE	(a) Payee name Sams Club		(b) Payee address; 155 W. El Dorado Blvd. Friendswood, TX 77546	City, State,	Zip Code
8	PURPOSE OF	(a) Category		(b) Description		
0	EXPENDITURE  X Political	(See Categories listed at the top Advertising Expense	of this schedule)	items for parade		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held	
e	xpenditure to benefit C/OH					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid	
	Expenditure from corporate funds	\$16.17	06/23/2025			
	PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code
		Kroger		1300 Fairmont Pkwy.		
		() 2 :		La Porte, TX 77571		
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description candy for parade		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense	
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held	