#### 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) 00063870 3 COMMITTEE NAME **OFFICE USE ONLY** Tarrant County Democratic Women's Club Date Received **ELECTRONICALLY FILED** 07/07/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** P.O. Box 471181 Date Hand-delivered or Date Postmarked Fort Worth, TX 76147 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Vicki NAME NICKNAME LAST **SUFFIX** Moore STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 5405 Stonelake Drive STREET **ADDRESS** (Residence or Business) Haltom City, TX 76137 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 5405 Stonelake Drive MAILING **ADDRESS** Haltom City, TX 76137 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (817) 319-5757 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** X Other Month Day Year Primary Runoff 06/30/2025 General Special Semi Annual **GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID (	Ethics Commission Filers)
Tarrant County Dem	00063870			
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	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	PLEDGES, LOANS, CONTRIBUTIONS M	O POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	6,810.00
	2. TOTAL POLITICA (OTHER THAN PLE	IL CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	6,810.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	4,333.46
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	28,384.78
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT	<u> </u>		·	
		I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code.		
		Vicki I	Moore	
		Signature of Can	npaign Treasurer	
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscril	bed before me, by the said _	, th	is the	day
		which, witness my hand and seal of office.		
Signature of officer	r administering oath	Printed name of officer administering oath	Title of officer a	administering oath

### **SUBTOTALS - GPAC**

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

					3 01 10	
<b>17</b> CO	MMITTE	(Ethi	cs Commission Filers)			
Tarrant County Democratic Women's Club 00063870						
	HEDULI			SUBTOTAL AMOUNT		
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	6,510.00	
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	300.00	
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	)R	\$		
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$		
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG.	\$			
7.	7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION					
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$		
9.	. X SCHEDULE E: LOANS				0.00	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	4,333.46	
11.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00	
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00	
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$		

PLE	DGED CONTRIBUT	TONS			SCHEDULE	В	
T	he Instruction Guide expl	1	1 Total pages Schedule B: Sch: 1/1 Rpt: 4/10				
2 FILER N	AME	3					
Tarrant (	County Democratic Women's		00063870				
4 TOTAL	OF UNITEMIZED PLEDG	ES			\$	0.00	
<b>5</b> Date	6 Full name of pledgor	6 Full name of pledgor out-of-state PAC (ID#:)				1	
		<del></del>			pledge (\$) (If applicable)		
	7 Pledgor Address;	City; State; Zip Code					
					Check if travel outside of Texas. Complete S	chedule T	
10 Principal	occupation / Job title (See Instruc	tions)	11 Employer (See Inst	tructi	ions)		

	LOANS					SCHEDULE E
	The Instruction	on Guide explains how t		ages Schedule E: /1 Rpt: 5/10		
2	FILER NAME Tarrant County	Democratic Women's Club			(Ethics Commission Filers)	
4	TOTAL OF UN	NITEMIZED LOANS			I	\$ 0.00
5	Date of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)
6	Is lender a financial institution?	8 Lender address; Cit	y; State;	Zip Code		10 Interest Rate
						11 Maturity Date
12	Principal occupati	on / Job title (See Instructions)		13 Employer (See Instru	ctions)	1
14	Description of Col	lateral		15 Check if personal fun	ds were deposite	d into political account (See Instructions)
16	GUARANTOR INFORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
	not applicable	18 Guarantor address; Cit		Zip Code		
	Principal occupati	on		21 Employer (See Instru	ctions)	

### 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	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: 1/5 Rpt: 6/10	Tarrant County Democratic Women's Club 00063870
4 Date	5 Payee name
06/30/2025	ActBlue
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$100.03	P. O. Box 441146
Expenditure from	
corporate funds	Sommerville, MA 02144
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Transaction fees for reporting period
	Transaction rees for reporting period
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/28/2025	Frost Bank
Amount (\$)	Payee address; City; State; Zip Code
\$5.00	1300 Summit Avenue
******	
Expenditure from corporate funds	Fort Worth, TX 76102
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Bank Fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	Davies same
Date 01/31/2025	Payee name Frost Bank
Amount (\$)	Payee address; City; State; Zip Code
\$5.00	1300 Summit Avenue
Expenditure from	
corporate funds	Fort Worth, TX 76102
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Bank Fee
	Banki ee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ 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		mittee	Gift/Awards/Memor Legal Services <b>The Instructio</b> n	·		Vages	s/Contract Labor		Travel Out of Di OTHER (enter a		listed above)
1	Total pages Schedule F1:	2 F	FILER NAME						3	Filer ID	(Ethics Co	ommission Filers)
	Sch: 2/5 Rpt: 7/10	l		nty Democra	tic Women's	Club				00063870		
4	Date	5 F	Payee name									
	01/29/2025	+	HostGator									
6	Amount (\$)	<b>7</b> F	Payee addres	s; City;	Stat	e; Zip Co	ode					
	\$47.95	5	5005 Mitche	lldale								
		5	Suite 100									
Ш	Expenditure from corporate funds	F	Houston, TX	77092								
8	PURPOSE	(a) (	Category (Se	e Categories listed	at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE		Office Overh	ead/Rental I	Expense					de of Texas. Com		le T.
								Website Main		officeholder living	g expense	
								WEDSILE Main	itei	iace		
Ļ	Complete ONLY if direct		andidata/Offic			Office				Office le	~ l al	
9	expenditure to benefit C/OF		andidate/Onic	eholder name		Office sou	igni			Office h	eiu	
	Date	F	Payee name									
	02/03/2025	l	Public Stora	ge								
-	Amount (\$)	F	Payee addres	s; City;	State	e; Zip Co	ode					
	\$73.00	l	5204 McCar			-, -,-						
	Ψ. 0.00		,	.,								
	Expenditure from corporate funds	F	ort Worth,	TX 76115								
	PURPOSE	(a) (	Category (Se	e Categories listed	at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE		Office Overh	ead/Rental I	Expense			<b>=</b>		de of Texas. Com		le T.
								Storage Rent		officeholder living	J expense	
								Storage Ment	ai			
L	Complete ONLY if direct		andidate/Offic	eholder name		Office sou	laht			Office h	əld	
	expenditure to benefit C/OF		ariuluate/Onic	enoluei name		Office Soc	igiii			Office III	ciu	
Г	Date	F	Payee name									
	02/03/2025	F	Public Stora	ge								
	Amount (\$)	F	Payee addres	s; City;	Stat	e; Zip Co	ode					
	\$73.00	l	5204 McCar			•						
	Expenditure from corporate funds	F	ort Worth,	TX 76115								
	PURPOSE	(a) (	Category (Se	e Categories listed	at the top of this so	chedule)	(b)	Description				
	OF EXPENDITURE		Office Overh	ead/Rental I	Expense					de of Texas. Com		le T.
	<del></del>							Check if Austin, Storage Rent		officeholder living	g expense	
								Storage Relit	aı			
L	Complete ONLY if direct		andidata/Offic	oboldor nore		Office as:	laht			Office	old	
	Complete ONLY if direct expenditure to benefit C/OF		anuiuale/OMC	eholder name		Office sou	igril			Office h	tiu	
ı												

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal manua Cabadula E4.	
1 Total pages Schedule F1: Sch: 3/5 Rpt: 8/10	2 FILER NAME Tarrant County Democratic Women's Club  3 Filer ID (Ethics Commission Filers) 00063870
4 Date	5 Payee name
06/30/2025	Square Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$76.14	1455 Market Street, Suite 600
Expenditure from corporate funds	San Francisco, CA 94103
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Transaction fees for reporting period
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/16/2025	Stage West Theater
	-
Amount (\$)	Payee address; City; State; Zip Code
\$883.34	821 W Vickery Blvd
Expenditure from corporate funds	Fort Worth, TX 76104
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Data	
Date	Payee name
02/18/2025	Stage West Theater
Amount (\$)	Payee address; City; State; Zip Code
\$1,325.00	821 W Vickery Blvd
¥=,0=0.00	G== 11 116.16.1, =116.
Expenditure from corporate funds	Fort Worth, TX 76104
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Rent
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
,	

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

Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/5 Rpt: 9/10	Tarrant County Democratic Women's Club	00063870
4 Date	5 Payee name	1
06/12/2025	TDW	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$180.00	POB 301411	
Expenditure from corporate funds	Austin, TX 78703	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	) Description
OF	Fees	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Membership Dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
Date	Payee name	
04/18/2025	TDW	
Amount (\$)	Payee address; City; State; Zip Code	
\$470.00	POB 301411	
Expenditure from		
corporate funds	Austin, TX 78703	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Membership Dues
		Wellbership Bues
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O		-
Date	Payee name	
03/11/2025	TDW	
Amount (\$) \$320.00	Payee address; City; State; Zip Code POB 301411	
Ψ320.00	FOB 301411	
Expenditure from	Aughin TV 70702	
corporate funds	Austin, TX 78703	
PURPOSE OF	1 ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Fees	Check if Austin, TX, officeholder living expense
		Membership Dues
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	4	

#### 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: 5/5 Rpt: 10/10	Tarrant County Democratic Women's Club  00063870
4 Date	5 Payee name
01/21/2025	TDW
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$240.00	POB 301411
Expenditure from corporate funds	Austin, TX 78703
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Membership Dues
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/24/2025	Tarrant County Democratic Woman's Club Scholarship Fund
Amount (\$)	Payee address; City; State; Zip Code
\$430.00	PO Box 471181
Ψ430.00	FO BOX 47 1101
Expenditure from	
corporate funds	Fort Worth, TX 76147
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Gift/Awards/Memorials Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Transfer to scholarship fund
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Data	Davies same
Date	Payee name
01/28/2025	US Post Office
Amount (\$)	Payee address; City; State; Zip Code
\$105.00	1300 Harwood Rd
Expenditure from	Podford TV 76021
corporate funds	Bedford, TX 76021
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
ZAI ZHBITONZ	Check if Austin, TX, officeholder living expense
	Post Office Box Rental
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1