

CORRECTION/AMENDMENT AFFIDAVIT FOR POLITICAL COMMITTEE

FORM COR-PAC

1 Filer ID (Ethics Commission Filers) 00082203		2 Total pages filed: 24		OFFICE USE ONLY	
3 COMMITTEE NAME Bay Area Democratic Movement				Date Received ELECTRONICALLY FILED 07/08/2025	
4 TREASURER NAME Aguilar, Kathryn				Date Hand-delivered or Date Postmarked	
5 ORIGINAL REPORT TYPE		<input type="checkbox"/> January 15 <input checked="" 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) _____	
6 ORIGINAL PERIOD COVERED		Month Day Year 04/24/2025		THROUGH Month Day Year 06/30/2025	
				Receipt # Amount	
				Date Processed	
				Date Imaged	

7 EXPLANATION OF CORRECTION
Some credit card fees were not initially recorded. Some donations were not added initially for period of late April to early May 2025.

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.

Kathryn Aguilar

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) 00082203	2 Total pages filed: 24
3 COMMITTEE NAME Bay Area Democratic Movement			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/08/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3119 Fondren St La Porte, TX 77571		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Kathryn NICKNAME LAST SUFFIX Aguilar		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3119 Fondren Street La Porte, TX 77571		
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3119 Fondren Street La Porte, TX 77571		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (832) 906-0032		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" 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 04/24/2025 THROUGH Month Day Year 06/30/2025		
11 ELECTION	ELECTION DATE Month Day Year	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Bay Area Democratic Movement		13 Filer ID (Ethics Commission Filers) 00082203
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 checked="" 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)	\$ 1,835.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,028.86
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 13,883.17
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.

Kathryn Aguilar

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 - GPAC**FORM GPAC**
COVER SHEET PG 3
4 of 24

17 COMMITTEE NAME Bay Area Democratic Movement		18 Filer ID (Ethics Commission Filers) 00082203
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,835.00
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	\$ 1,028.86
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 type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
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: 1/17 Rpt: 5/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 05/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adkison-Brown, Denise <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77004	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law Offices of Denise Adkison-Brown PLLC
Date 06/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adkison-Brown, Denise <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Denise Adkison-Brown PLLC
Date 05/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allebach, Merry <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546-3116	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Not employed		Employer (See Instructions) None
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Lauren Elizabeth <hr/> Contributor address; City; State; Zip Code Alvin, TX 77511	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Operations/Sales		Employer (See Instructions) Oil/Gas
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bass, Isabel (Dr.) <hr/> Contributor address; City; State; Zip Code Webster, TX 77598	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Doctor		Employer (See Instructions) not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/17 Rpt: 6/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 06/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Zachary Carter <hr/> 6 Contributor address; City; State; Zip Code Seabrook, TX 77586	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Barista		9 Employer (See Instructions) Starbucks
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berka, Angela <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Director, Finance		Employer (See Instructions) Houston Mechatronics
Date 05/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berka, Angela (Ms.) <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) none
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bisbano, Josette <hr/> Contributor address; City; State; Zip Code Houston, TX 77089	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) None
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boozel, Julie <hr/> Contributor address; City; State; Zip Code Bacliff, TX 77518	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Sales Executive		Employer (See Instructions) CVS Health

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/17 Rpt: 7/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 05/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boozel, Julie <hr/> 6 Contributor address; City; State; Zip Code Bacliff, TX 77518	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Sales Executive		9 Employer (See Instructions) CVS Health
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brodie, Ardeth <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) none
Date 06/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brodie, Ardeth <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) none
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Leti <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Product Analyst		Employer (See Instructions) LivaNova
Date 05/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cavazos, Leti <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Product Analyst		Employer (See Instructions) LivaNova

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/17 Rpt: 8/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 05/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobarruvias, John <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77062	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cobarruvias, John <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 05/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotrado, Linda <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Legal Secretary		Employer (See Instructions) Hebinck & Alter
Date 06/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cotrado, Linda <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Legal Secretary		Employer (See Instructions) Hebinck & Alter
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutcher, Lamonne Marie <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) UTMB

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/17 Rpt: 9/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 06/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Czinder, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Baycliff, TX 77518	7 Amount of Contribution (\$) \$35.00
8 Principal occupation / Job title (See Instructions) Loan Specialist		9 Employer (See Instructions) Zion Bank
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DiBassie, Michelle <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Structural Concrete Systems LLC
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DiBassie, Michelle <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Structural Concrete Systems LLC
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Durrant, Lorena <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Pharmacist		Employer (See Instructions) HPH
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dwyer, Sandra <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/17 Rpt: 10/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 05/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frame, William <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77034	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frame, William <hr/> Contributor address; City; State; Zip Code Houston, TX 77034	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franklyn, Yolanda <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Massage Therapist		Employer (See Instructions) Self
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grim, Clifton (Mr.) <hr/> Contributor address; City; State; Zip Code Nassau Bay, TX 77058	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Angela <hr/> Contributor address; City; State; Zip Code Humble, TX 77346	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Harris

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/17 Rpt: 11/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 06/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hockstedler, Clara <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77058	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 05/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Jane <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Dance Teacher		Employer (See Instructions) JRSOD
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennings, Jane <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Dance Teacher		Employer (See Instructions) JRSOD
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Nancy M (Mrs.) <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 05/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Nancy M (Mrs.) <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/17 Rpt: 12/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 05/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaus, Nancy <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77059	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Dental Hygienist		9 Employer (See Instructions) Designer Smiles
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klaus, Nancy <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Dental Hygienist		Employer (See Instructions) Designer Smiles
Date 05/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knowles, Ryan <hr/> Contributor address; City; State; Zip Code Houston, TX 77011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) postman		Employer (See Instructions) USPS
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knowles, Ryan <hr/> Contributor address; City; State; Zip Code Houston, TX 77011	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) postman		Employer (See Instructions) USPS
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Krist, Kim <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) not employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/17 Rpt: 13/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 06/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laundau, Sarah Beth <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77009	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Lawyer		9 Employer (See Instructions) Robert Markland
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Tracey <hr/> Contributor address; City; State; Zip Code Seabrook, TX 77586	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Tracey <hr/> Contributor address; City; State; Zip Code Seabrook, TX 77586	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Masden, Deborah <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) not employed
Date 05/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mason, Jennifer <hr/> Contributor address; City; State; Zip Code League City, TX 77573	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) analyst		Employer (See Instructions) NASA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/17 Rpt: 14/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 05/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maxwell, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77059	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) care giver		9 Employer (See Instructions) self
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Beau <hr/> Contributor address; City; State; Zip Code Houston, TX 77004	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moghbeli, Sam <hr/> Contributor address; City; State; Zip Code Webster, TX 77598	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Aerospace
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nassiri, Nicole <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) DISD
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nassiri, Nicole <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) DISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/17 Rpt: 15/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 05/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neckelmann, Shawn <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77062-5914	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) SW Developer		9 Employer (See Instructions) Universal Weather & Aviation
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neckelmann, Shawn <hr/> Contributor address; City; State; Zip Code Houston, TX 77062-5914	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) SW Developer		Employer (See Instructions) Universal Weather & Aviation
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Barrie Lynn <hr/> Contributor address; City; State; Zip Code Houston, TX 77058	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Caregiver		Employer (See Instructions) Self
Date 06/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onorato, Michelle <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) self
Date 04/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onorato, Michelle <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/17 Rpt: 16/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Onorato, Michelle (Dr.) <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77062	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Physician		9 Employer (See Instructions) self
Date 05/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborne, Dylan <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Treasurer		Employer (See Instructions) Harris County
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osborne, Dylan <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Treasurer		Employer (See Instructions) Harris County
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paz, Martha Sendejo <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Child/Youth Care		Employer (See Instructions) Catholic Charities
Date 05/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Rebecca <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Book seller		Employer (See Instructions) Freeman Library

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/17 Rpt: 17/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 06/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perkins, Rebecca <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Book seller		9 Employer (See Instructions) Freeman Library
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinkerton, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77058	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Statistician		Employer (See Instructions) Aerodyne Industries
Date 05/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poritz, Darwin <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Statistician		Employer (See Instructions) Aerodyne Industries
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rickert, John <hr/> Contributor address; City; State; Zip Code Seabrook, TX 77586	Amount of Contribution (\$) \$35.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Metecs

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/17 Rpt: 18/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 05/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riker, Olive <hr/> 6 Contributor address; City; State; Zip Code Seabrook, TX 77586	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) none
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riker, Olive <hr/> Contributor address; City; State; Zip Code Seabrook, TX 77586	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) none
Date 05/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rokes, Susan <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) none
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rokes, Susan <hr/> Contributor address; City; State; Zip Code Santa Fe, TX 77517	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) Fort Bend County
Date 06/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rokes, Susan <hr/> Contributor address; City; State; Zip Code Santa Fe, TX 77517	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) Fort Bend County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/17 Rpt: 19/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 05/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rokes, Susan <hr/> 6 Contributor address; City; State; Zip Code Santa Fe, TX 77517	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) consultant		9 Employer (See Instructions) Fort Bend County
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudnicki, Janet <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Accountant		Employer (See Instructions) Service Corporation International
Date 05/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singh, Pomila <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singh, Pomila <hr/> Contributor address; City; State; Zip Code Houston, TX 77059	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none
Date 05/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Elwood <hr/> Contributor address; City; State; Zip Code El Lago, TX 77586	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/17 Rpt: 20/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 06/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Elwood <hr/> 6 Contributor address; City; State; Zip Code El Lago, TX 77586	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) none
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stalder, Barbara (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77089	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 05/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stalder, Barbara (Judge) <hr/> Contributor address; City; State; Zip Code Houston, TX 77089	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) State of Texas
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandagriff, Judy <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none
Date 06/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandagriff, Judy <hr/> Contributor address; City; State; Zip Code Houston, TX 77062	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/17 Rpt: 21/24
2 FILER NAME Bay Area Democratic Movement		3 Filer ID (Ethics Commission Filers) 00082203
4 Date 04/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandagriff, Judy 6 Contributor address; City; State; Zip Code Houston, TX 77062	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) none
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wyatt, Carla (Dr.) Contributor address; City; State; Zip Code Houston, TX 77021	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Treasurer		Employer (See Instructions) Harris County

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: 1/3 Rpt: 22/24	2 FILER NAME Bay Area Democratic Movement	3 Filer ID (Ethics Commission Filers) 00082203
4 Date 06/30/2025	5 Payee name Act Blue	
6 Amount (\$) \$53.22 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees for Act Blue
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/25/2025	Candidate/Officeholder name Avast/Digital River Inc.	
Amount (\$) \$108.24 <input type="checkbox"/> Expenditure from corporate funds	Office sought 10380 Bren Road West Minnetonka, MN 55343	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Anti virus Software	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Anti Virus Software
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 05/13/2025	Candidate/Officeholder name Beto's Taqueria	
Amount (\$) \$155.03 <input type="checkbox"/> Expenditure from corporate funds	Office sought 17068 Saturn Lane Houston, TX 77052-2334	
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 Catering for Meeting
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: 2/3 Rpt: 23/24	2 FILER NAME Bay Area Democratic Movement	3 Filer ID (Ethics Commission Filers) 00082203
4 Date 06/10/2025	5 Payee name Lucian's Caribbean Grill	
6 Amount (\$) \$194.85 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1035 Clear Lake Blvd Houston, TX 77062	
8 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 Member meeting catering of food
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/11/2025	Candidate/Officeholder name Office sought Office held	
Payee name Simpletexting Co		
Amount (\$) \$470.11 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1815 Purdy Ave Miami Beach, FL 33139	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Texting annual fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/11/2025	Candidate/Officeholder name Office sought Office held	
Payee name Simpletexting Co		
Amount (\$) \$34.77 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1815 Purdy Ave Miami Beach, FL 33139	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fees for texting application
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: 3/3 Rpt: 24/24	2 FILER NAME Bay Area Democratic Movement	3 Filer ID (Ethics Commission Filers) 00082203
4 Date 06/10/2025	5 Payee name Square, Inc.	
6 Amount (\$) \$10.64 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1455 Market Street, Suite 600 San Francisco, CA 94103	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit Card transaction fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2025	Payee name Trustmark Bank	
Amount (\$) \$2.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 14870 Space Center Boulevard Houston, TX 77062	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense monthly Paper statement fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held