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) 00089436 3 COMMITTEE NAME **OFFICE USE ONLY** Texans for Educational Excellence Date Received **ELECTRONICALLY FILED** 07/14/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **ADDRESS** 28610 HWY 290 STE F09 BOX 375 Date Hand-delivered or Date Postmarked X Change of Address Cypress, TX 77433 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Kristen NAME NICKNAME LAST **SUFFIX** Machicek STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 28610 HWY 290 STE F09 BOX 375 STREET **ADDRESS** (Residence or Business) Cypress, TX 77433 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 28610 HWY 290 STE F09 BOX 375 MAILING **ADDRESS** Cypress, TX 77433 X Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 536-1920 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 Other Runoff General Special

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)		
Texans for Education	nai Excellence		00089436			
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.)					
		B. Opposed				
	3. Officeholders					
	Assisted (Identify by name or, if applicable, classify by party.)					
.5 CONTRIBUTION TOTALS		D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR				
1017120	CONTRIBUTIONS N	MADE ELECTRONICALLY) qualifies for the higher itemization threshold	 \$	0.00		
	2. TOTAL POLITICA	2. TOTAL POLITICAL CONTRIBUTIONS				
	(OTHER THAN PLE	EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,000.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				
	4. TOTAL POLITICA	AL EXPENDITURES	\$	798.16		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST IG PERIOD	DAY \$	201.84		
OUTSTANDING LOAN TOTALS	1 · · · · · · · · · · · · · · · · · · ·	AMOUNT OF ALL OUTSTANDING LOANS AS OF REPORTING PERIOD	THE \$	0.00		
6 AFFIDAVIT			<u> </u>			
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.				
		Ms. Kriste Signature of Ca	n Machicek			
		Signature of Ca	ınpaign measi	irei		
AFFIX NOTA	RY STAMP / SEAL ABOVE					
Sworn to and subscrib	ped before me, by the said _	, t	his the	day		
		which, witness my hand and seal of office.				
Signature of officer	administering oath	Printed name of officer administering oath	Title of office	cer administering oath		
-		Ŭ		-		

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

				3 of 6
		EE NAME r Educational Excellence	18 Filer ID 00089436	(Ethics Commission Filers)
	HEDULI	SUBTOTAL AMOUNT		
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 1,000.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	·R	\$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	TION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 798.16
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/6	
2	FILER NAME Texans for Educational Excellence			3 Filer ID (Ethics Commission Filers) 00089436
4	Date 03/12/2025	 Full name of contributor	7 Amount of Contribution (\$) \$1,000.00	
8	Principal occu	Houston, TX 77240 pation / Job title (See Instructions)	9 Employer (See Instructions	5)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

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	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 1/2 Rpt: 5/6	Texans for Educational Excellence		00089436	
4 Date	5 Payee name	•		
04/16/2025	CAZ Consulting, LLC			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$750.00	5049 Edwards Ranch Road			
- Evnanditura from				
Expenditure from corporate funds	Fort Worth, TX 76109			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Advertising Expense		outside of Texas. Com	
_/		Check if Austin, Website Design	TX, officeholder living	g expense
		Website Desig	Ju	
9 Complete ONLY if direct	Candidate/Officeholder name Office so	<u> </u> ught	Office he	-iq
expenditure to benefit C/OI		agiit	Omoc no	514
Date	Payee name			
05/06/2025	CAZ Consulting, LLC			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$24.16	5049 Edwards Ranch Road	ouc		
Ψ2 1.10	oo lo Zawarao Manon Moda			
Expenditure from corporate funds	Fort Worth, TX 76109			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Advertising Expense	l <u>—</u>	outside of Texas. Com TX, officeholder living	
		Website Hosti		, oxponed
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office he	eld
expenditure to benefit C/OI	-1			
Date	Payee name			
05/30/2025	Regions Bank			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$12.00	28430 Hempstead Rd.			
— Companditure from				
Expenditure from corporate funds	Cypress, TX 77433			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees	l <u>L</u>	outside of Texas. Com	
_/		-	TX, officeholder living	g expense
		Monthly Bank	ing ice	
Complete ONLY if direct	Candidate/Officeholder name Office so	<u> </u> uaht	Office he	eld .
expenditure to benefit C/OI		~g₁1t	Cilioc He	

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ı - Il Co	nmittee	Gift/Awards/Memorials Legal Services The Instruction Gu			ense ges/Contract Labor	Travel Out OTHER (er	of District tetra a category not listed above)
1	Total pages Schedule F1:	2	FII FR NAME					3 Filer ID	(Ethics Commission Filers)
-	Sch: 2/2 Rpt: 6/6	-		= Educational Exc	ellence			000894	
4	Date	5	Payee name	!					
	06/30/2025		Regions Ba						
6	Amount (\$)	7	Payee addre	ess; City;	State;	Zip Cod	e		
	\$12.00		28430 Hem	npstead Rd.					
_	T Expenditure from								
Ľ	corporate funds	_	Cypress, T	X 77433		1.			
8	PURPOSE OF	(a)		ee Categories listed at th	e top of this sch	edule) (b) Description		0 1 0 1 1 7
	EXPENDITURE		Fees				ш	n, TX, officeholder	Complete Schedule T.
							Monthly Ban		iving expense
								9 .00	
9	Complete ONLY if direct	<u> </u>		iceholder name		Office soug	ht	Offic	e held
ľ	expenditure to benefit C/O	⊣ `	zandidate/Om	icenoidei name		Tilice soug	ı	Onic	e neiu