

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) 00015833	2 Total pages filed: 6	
3 COMMITTEE NAME Comal County Democrats			OFFICE USE ONLY	
			Date Received ELECTRONICALLY FILED 07/08/2025	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
4 COMMITTEE ADDRESS			ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P. O. Box 310767 1592 W. San Antonio St. New Braunfels, TX 78130	
5 CAMPAIGN TREASURER NAME			MS / MRS / MR FIRST MI Ms. Sonia J.	
			NICKNAME LAST SUFFIX Escobar	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)			STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 896 Highland Vista New Braunfels , TX 78130	
7 CAMPAIGN TREASURER MAILING ADDRESS			STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 896 Highland Vista New Braunfels , TX 78130	
8 CAMPAIGN TREASURER PHONE			AREA CODE PHONE NUMBER EXTENSION (361) 228-1084	
9 REPORT TYPE			☐ January 15 ☐ 30th day before election ☐ Dissolution (Attach PAC-DR) ☒ July 15 ☐ 8th day before election ☐ 10th day after campaign treasurer termination ☐ Runoff	
10 PERIOD COVERED			Month Day Year 01/01/2025 THROUGH Month Day Year 06/30/2025	
11 ELECTION			ELECTION DATE Month Day Year ELECTION TYPE ☐ Primary ☐ Runoff ☐ Other ☐ General ☐ Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Comal County Democrats		13 Filer ID (Ethics Commission Filers) 00015833
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) ☐ check here if this report qualifies for the higher itemization threshold
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 9,952.27
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 5,942.59
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,942.59
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 20,810.61
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.

Ms. Sonia J. Escobar

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
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17 COMMITTEE NAME Comal County Democrats		18 Filer ID (Ethics Commission Filers) 00015833
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9,952.27
2.	☒ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	☒ SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	☐ SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	☐ SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	☐ SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
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.	☒ SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 5,942.59
11.	☒ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
12.	☒ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
13.	☒ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
14.	☐ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	☒ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 9.14

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/6
2 FILER NAME Comal County Democrats		3 Filer ID (Ethics Commission Filers) 00015833
4 Date 01/07/2025	5 Full name of contributor ☐ out-of-state PAC (ID#: _____) Bozeman, Janet S. 6 Contributor address; City; State; Zip Code New Braunfels, TX 78130-3105	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) N/A

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
Sch: 1/1 Rpt: 5/6

2 FILER NAME
Comal County Democrats

3 Filer ID (Ethics Commission Filers)
00015833

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

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

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
Sch: 1/1 Rpt: 6/6

2 FILER NAME
Comal County Democrats

3 Filer ID (Ethics Commission Filers)
00015833

4 Date 03/31/2025	5 Name of person from whom amount is received Frost Bank	8 Amount (\$) \$4.54
	6 Address of person from whom amount is received; City; State; Zip Code New Braunfels, TX 78130	
	7 Purpose for which amount is received Interest on savings acct	

Date 06/30/2025	Name of person from whom amount is received Frost Bank	Amount (\$) \$4.60
	Address of person from whom amount is received; City; State; Zip Code New Braunfels, TX 78130	
	Purpose for which amount is received Interest on savings acct	