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) 00088061 3 COMMITTEE NAME **OFFICE USE ONLY** Westlake Eanes Democrats Date Received **ELECTRONICALLY FILED** 07/12/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 2 Jeffery Cove Date Hand-delivered or Date Postmarked Change of Address Rollingwood, TX 78746 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** John I. NAME NICKNAME LAST **SUFFIX** Hinton STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 2 Jeffery Cove STREET **ADDRESS** (Residence or Business) Rollingwood, TX 78746 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2 Jeffery Cove MAILING **ADDRESS** Rollingwood, TX 78746 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 327-5155 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 05/03/2025 General Special Eanes ISD Trustee election **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC** COVER SHEET PG 2

2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Westlake Eanes Democ	crats			0008806	1
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			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
5 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANTEE:	ICALLY)	\$	1,204.09
	2. TOTAL POLITICA (OTHER THAN PLE		ONS R GUARANTEES OF LOANS)	\$	1,204.09
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXP	ENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITUR	RES	\$	1,588.18
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		ST DAY \$	6,157.13	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		F THE \$	0.00	
6 AFFIDAVIT	<u> </u>				
		true	rear, or affirm, under penalty of and correct and includes all in er Title 15, Election Code.		
				n I. Hinton	
			Signature of 0	Campaign Treas	surer
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	before me, by the said			, this the	day
of					

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

				3 of 6
		EE NAME Eanes Democrats	18 Filer ID 00088061	(Ethics Commission Filers)
19 SCH NAN	HEDULE ME OF S	SUBTOTAL AMOUNT		
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS				\$ 1,204.09
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$	
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 C	ORGANIZATION	\$
9.		SCHEDULE E: LOANS		\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			\$ 1,588.18	
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			\$	
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS			\$	
13.	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	\$

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 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 co	mplete this form.			
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Sch: 1/3 Rpt: 4/6	Westlake Eanes Democrats	00088061			
4 Date	5 Payee name				
03/17/2025	Bland-Ho, Heather (Ms.)				
6 Amount (\$)	7 Payee address; City; State; Zip Co	de			
\$863.46	2804 Regents Park				
Expenditure from corporate funds	Austin, TX 78746				
8 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			
		Reimbursement for MailChimp			
		,			
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held			
expenditure to benefit C/OI		grit Office Held			
Data					
Date	Payee name				
03/17/2025	Grandparents for Public Schools				
Amount (\$)	Payee address; City; State; Zip Co	de			
\$200.00	000 xxxx				
Evnanditura from					
Expenditure from corporate funds	Austin, TX 78746				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
OF EXPENDITURE	Postcards	Check if travel outside of Texas. Complete Schedule T.			
EXPENDITORE		Check if Austin, TX, officeholder living expense			
		Postcards			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght Office held			
experiditure to benefit C/Oi	1				
Date	Payee name				
05/14/2025	Hinton, John				
Amount (\$)	Payee address; City; State; Zip Co	de			
\$99.90	2 Jeffery Cove				
Expenditure from corporate funds	Rollingwood, TX 78746				
PURPOSE		(h) Description			
OF	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	Accounting/Banking	Check if Austin, TX, officeholder living expense			
		Reimbursement for IRS return			
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held			
expenditure to benefit C/OI	1				

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
OTHER (enter a category not listed above)

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: 2/3 Rpt: 5/6	Westlake Eanes Democrats 00088061				
4 Date	5 Payee name				
05/10/2025	Lass, Julie (Ms.)				
6 Amount (\$)	7 Payee address; City; State; Zip Code				
\$112.21	6207 Turtle Point				
Expenditure from corporate funds	Austin, TX 78746				
8 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 Reimbursement for postcards				
	Reinibursement for postcards				
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
01/01/2025	Lavi, Victoria (Ms.)				
Amount (\$)	Payee address; City; State; Zip Code				
\$216.67	6659 Whitemarsh Valley Walk				
Expenditure from corporate funds	Austin, TX 78746				
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
OF EXPENDITURE	Advertising Expense				
	Check if Austin, TX, officeholder living expense				
	Reimburse for website				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
Date	Payee name				
04/14/2025	MailChimp				
Amount (\$)	Payee address; City; State; Zip Code				
\$47.97	00 XXXX				
Ψ41.01					
Expenditure from corporate funds	Austin, TX 78701				
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 MailChimp				
	MaliChinp				
Complete CMI V if alian-	Condidate/Officeholder name Office cought				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Food/Beverage Expense Polling Expense Travel in District y - Gift/Awards/Memorials Expense Printing Expense Travel Out of District al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.				
2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
Westlake Eanes Democrats 00088061				
5 Payee name				
MailChimp				
7 Payee address; City; State; Zip Code				
00 xxxx				
Austin, TX 78701				
(a) Category (See Categories listed at the top of this schedule) (b) Description				
Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
MailChimp				
Candidate/Officeholder name Office sought Office held H				