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) 00017327 3 COMMITTEE NAME **OFFICE USE ONLY** Teamsters Local #745 Drive Date Received **ELECTRONICALLY FILED** 07/11/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1007 Jonelle St Date Hand-delivered or Date Postmarked Dallas, TX 75217 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Brent NAME NICKNAME LAST **SUFFIX** Taylor STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1007 Jonelle St. STREET **ADDRESS** (Residence or Business) Dallas, TX 75217 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1007 Jonelle Street MAILING **ADDRESS** Dallas, TX 75217 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 398-0661 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** Day Month Year Primary Runoff Other General Special **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)
Teamsters Local #74	5 Drive		00017327	
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		
	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 MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	73.00
	2. TOTAL POLITICA (OTHER THAN PLE	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	36,269.84
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	48,998.88
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	325,126.95
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 inforr under Title 15, Election Code.		
		Mr Bro	nt Taylor	
		Signature of Car		rer
AFFIX NOTA	RY STAMP / SEAL ABOVE	•		
Sworn to and subscrib	ed before me, by the said _	, th	nis 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 offic	er administering oath

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

					3 of 11
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Commissi	on Filers)
Tea	msters	s Local #745 Drive	00017327	•	,
10 SCI	1EDI II I	SURTOTALS		1	
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL	AMOUNT	
NAME OF SCHEDOLE					
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	36,269.84
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	П	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO)R	\$	
	<u> </u>	ORGANIZATION			
_		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA	ATION OR		
5.	Ш	LABOR ORGANIZATION		\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.	П	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
	<u> </u>	ORGANIZATION		Ţ,	
8.	П	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (
0.	Ш	SCHEDOLE D. FLEDGED CONTRIBOTIONS FROM CORPORATION OR LABOR (JRGANIZATION	\$	
9.	Ш	SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	48,998.88
11.	П	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
	ш	CONEDULE 12. CIN AND INCOMMED OBLIGATIONS		Ψ	
12.	Ш	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	П	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
	ш_				
15	Γ.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	RETURNED		E 000 44
15.	X	TO FILER		\$	5,088.44
				1	

MONET	ARY POLITICAL CONTRIB	BUTIONS	SCHEDULE A1
The Instru	ction Guide explains how to complete	e this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/11
FILER NAME			3 Filer ID (Ethics Commission Filers)
Teamsters L	ocal #745 Drive		00017327
Date 03/14/2025			7 Amount of Contribution (\$) \$9,198.99
	N.W. Washington, DC 20001		
Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructi	ons)
Date	Full name of contributor X out-of-state F	PAC (ID#: <u>C00032979</u>	Amount of Contribution (\$)
05/05/2025	<u> </u>		\$17,437.86
	Contributor address; City; State; Zip Code		
	N.W. Washington, DC 20001		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor X out-of-state F	PAC (ID#: C00032979)	Amount of Contribution (\$)
06/23/2025			\$9,559.99
	Contributor address; City; State; Zip Code		
	1	į	
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructi	ons)
	The Instru FILER NAME Teamsters L Date 03/14/2025 Principal occu Date 05/05/2025 Principal occu Date 06/23/2025	The Instruction Guide explains how to complete FILER NAME Teamsters Local #745 Drive Date 03/14/2025 5 Full name of contributor	Date S Full name of contributor X out-of-state PAC (ID#: C00032979 Democratic Republican Independent Voter Education

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Total marian Calcadida F1.	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 1/4 Rpt: 5/11	2 FILER NAME Teamsters Local #745 Drive 3 Filer ID (Ethics Commission Filers) 00017327
4 Date	5 Payee name
06/30/2025	Equitable Advisors
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$10.00	5910 N. Central Expressway
	Suite 1575
Expenditure from corporate funds	Dallas, TX 75206
8 PURPOSE	(a) Cotagon (h) Deceription
OF	(a) Category (See Categories listed at the top of this schedule) Realized loss (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Realized loss on redemption of CDs.
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/01/2025	Internal Revenue Service
Amount (\$)	Payee address; City; State; Zip Code
\$988.88	P.O. Box 409101
Ψ000.00	1.0. Box 400101
Expenditure from corporate funds	Ogden, UT 84409
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Taxes Check if travel outside of Texas. Complete Schedule T.
_/	Check if Austin, TX, officeholder living expense
	2024 1120-POL Tax Due
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/18/2025	Longleaf Consulting
Amount (\$)	Payee address; City; State; Zip Code
\$39,000.00	4412 Merle Drive
Ψ00,000.00	THE MONO BING
Expenditure from corporate funds	Austin, TX 78745
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
LA LADITORL	Check if Austin, TX, officeholder living expense
	Lobby and consulting services
Complete ONLY if direct	Candidate/Officeholder name Office sought 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

Candidate/Officenoider/Political Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form.				
2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Teamsters Local #745 Drive	00017327			
5 Payee name				
Longleaf Consulting				
7 Payee address; City; State; Zip Co	ode			
4412 Merle Drive				
Austin, TX 78745				
(a) Category (See Categories listed at the top of this schedule)	(b) Description			
Consulting Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	Lobby and consulting services			
	Lobby and consuming services			
Candidate/Officeholder name Office sou	ught Office held			
	ugnt Office field			
<u> </u>				
Payee address; City; State; Zip Co	ode			
4412 Merle Drive				
Austin, TX 78745				
(a) Category (See Categories listed at the top of this schedule)	(b) Description			
Consulting Expense	Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense			
	Lobby and consulting services			
25				
	ught Office held			
Payee name				
Moore, Gregory				
Payee address; City; State; Zip Co	ode			
6928 Club Creek Dr				
Fort Worth, TX 76137				
(a) Category (See Categories listed at the top of this schedule)	(b) Description			
	Check if travel outside of Texas. Complete Schedule T.			
	Check if Austin, TX, officeholder living expense			
	Stipend			
Candidate/Officeholder name Office sou	ught Office held			
1				
	The Instruction Guide explains how to complete the complete to prove the complete the complete to prove the complete the			

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 Solicitation/Fundraising Expense
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	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/4 Rpt: 7/11	Teamsters Local #745 Drive 00017327
4 Date	5 Payee name
02/01/2025	Moore, Gregory
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	6928 Club Creek Dr
Expenditure from	Fort Worth, TX 76137
corporate funds	Folt Worth, 1A 70137
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
ZA ZABITORZ	Check if Austin, TX, officeholder living expense
	Stipend
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/01/2025	Moore, Gregory
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	6928 Club Creek Dr
Expenditure from corporate funds	Fort Worth, TX 76137
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
LAFENDITORE	Check if Austin, TX, officeholder living expense
	Stipend
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/31/2025	Moore, Gregory
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	6928 Club Creek Dr
φ300.00	0020 Oldb Orock Bi
Expenditure from	
corporate funds	Fort Worth, TX 76137
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Stipend
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

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

Credit Card Payment	The Instruction Guide explains how to 0	complete this form.
1 Total pages Schedule F1:	<u> </u>	3 Filer ID (Ethics Commission Filers)
Sch: 4/4 Rpt: 8/11	Teamsters Local #745 Drive	00017327
4 Date	5 Payee name	·
05/02/2025	Moore, Gregory	
6 Amount (\$)	7 Payee address; City; State; Zip C	Code
\$500.00	6928 Club Creek Dr	
Expenditure from corporate funds	Fort Worth, TX 76137	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Stipend
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Lought Office held
expenditure to benefit C/OI		
Date	Payee name	
06/03/2025	Moore, Gregory	
		Codo
Amount (\$)	Payee address; City; State; Zip (6928 Club Creek Dr	Souc
\$500.00	0920 Club Cleek DI	
Expenditure from corporate funds	Fort Worth, TX 76137	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Stipend
		Cuperia
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/OI		2
i		

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

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		pages Schedule K: 1/3 Rpt: 9/11	
2	FILER NAME		3	Filer	D (Ethics Commission File	rs)
	Teamsters Local #745 Drive 00017			7327		
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
	01/31/2025	Cetera				16.25
		6 Address of person from whom amount is received; City; State; Zip Code				
		Address of person from whom amount is received, City, State, 21p Code				
		Los Angeles, CA 90010				
			hack if naliti	cal cor	Intribution returned to filer	
		Interest	neek ii poiiti	cai coi	idibation retarried to mer	
⊨						
	Date	Name of person from whom amount is received			Amount (\$)	-0.40
	02/28/2025	Cetera			\$45	53.19
		Address of person from whom amount is received; City; State; Zip Code				
		Los Angeles, CA 90010				
		<u> </u>	heck if polition	cal cor	tribution returned to filer	
		Interest				
	Date	Name of person from whom amount is received			Amount (\$)	
	03/31/2025	Cetera			\$39	96.70
		Address of person from whom amount is received; City; State; Zip Code			"]	
		Los Angeles, CA 90010				
		Purpose for which amount is received Cr	heck if polition	cal cor	tribution returned to filer	
		Interest				
	Date	Name of person from whom amount is received			Amount (\$)	
	04/30/2025	Cetera			\$42	20.10
		Address of person from whom amount is received; City; State; Zip Code			"	
		Los Angeles, CA 90010				
		Purpose for which amount is received	heck if polition	cal cor	ntribution returned to filer	
		Interest				
F	Date	Name of person from whom amount is received			Amount (\$)	
	05/31/2025	Cetera				21.40
		Address of person from whom amount is received; City; State; Zip Code				
		Address of person from whom amount is received, City, State, 21p Code				
		Los Angeles, CA 90010				
			heck if polition	cal cor	tribution returned to filer	
		Interest	,			
\vdash		<u> </u>				

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: 2/3 Rpt: 10/11
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Teamsters Local #745 Drive	00017327
	1
4 Date 5 Name of person from whom amount is received	8 Amount (\$)
06/30/2025 Cetera	\$448.81
6 Address of person from whom amount is received; City; State; Zip Code	
Los Angeles, CA 90010	
7 Purpose for which amount is received C	Check if political contribution returned to filer
Interest	
Date Name of person from whom amount is received	Amount (¢)
l '	Amount (\$) \$0.19
	φυ.19
Address of person from whom amount is received; City; State; Zip Code	
Dallas, TX 75206	
Purpose for which amount is received	Check if political contribution returned to filer
Interest	
Date Name of person from whom amount is received	Amount (\$)
02/28/2025 Equitable Advisors	\$0.17
<u>`</u>	
Address of person from whom amount is received; City; State; Zip Code	
Dallas, TX 75206	
	Nearly for all the all and a second and a second and the second an
<u> </u>	Check if political contribution returned to filer
Interest	
Date Name of person from whom amount is received	Amount (\$)
03/31/2025 Equitable Advisors	\$0.19
Address of person from whom amount is received; City; State; Zip Code	
Dallas, TX 75206	
	Check if political contribution returned to filer
Interest	brick if political contribution returned to mer
Date Name of person from whom amount is received	Amount (\$)
04/30/2025 Equitable Advisors	\$0.18
Address of person from whom amount is received; City; State; Zip Code	
Dallas, TX 75206	
Purpose for which amount is received	Check if political contribution returned to filer
Interest	

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 3/3 Rpt: 11/11 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 00017327 Teamsters Local #745 Drive 8 Amount (\$) Date 5 Name of person from whom amount is received 05/31/2025 **Equitable Advisors** \$0.19 6 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75206 Purpose for which amount is received ☐ Check if political contribution returned to filer Interest Amount (\$) Date Name of person from whom amount is received 06/30/2025 **Equitable Advisors** \$1.07 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75206 Purpose for which amount is received Check if political contribution returned to filer Interest Date Name of person from whom amount is received Amount (\$) 02/03/2025 Gonzalez, Jessica \$2,500.00 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75203 Purpose for which amount is received X Check if political contribution returned to filer Check not cashed