

# SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC  
COVER SHEET PG 1

|                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                       |                                                                                                                                                                       |
|----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| The SPAC Instruction Guide explains how to complete this form. |                                                                                                                                                                                                                                                                                                                                                                                                                 | 1 Filer ID<br>(Ethics Commission Filers)<br>00088595                                                                                                                                  | 2 Total pages filed:<br>4                                                                                                                                             |
| 3 COMMITTEE NAME<br>CCISD Students First                       |                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                       | OFFICE USE ONLY<br>Date Received<br>ELECTRONICALLY FILED<br>07/14/2025<br>Date Hand-delivered or Date Postmarked<br>Receipt # Amount<br>Date Processed<br>Date Imaged |
| 4 COMMITTEE ADDRESS                                            | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>PO Box 1684<br><br>Copperas Cove, TX 76522                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                       |                                                                                                                                                                       |
| 5 CAMPAIGN TREASURER NAME                                      | MS / MRS / MR FIRST MI<br>Inez<br>NICKNAME LAST SUFFIX<br>Faison                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                       |                                                                                                                                                                       |
| 6 CAMPAIGN TREASURER STREET ADDRESS<br>(Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>707 Skyline Drive<br><br>Copperas Cove, TX 76522                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                       |                                                                                                                                                                       |
| 7 CAMPAIGN TREASURER MAILING ADDRESS                           | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>707 Skyline Drive<br><br>Copperas Cove, TX 76522                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                       |                                                                                                                                                                       |
| 8 CAMPAIGN TREASURER PHONE                                     | AREA CODE PHONE NUMBER EXTENSION<br>(254) 681-7897                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                       |                                                                                                                                                                       |
| 9 REPORT TYPE                                                  | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded modified reporting limit<br><input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)<br><input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination |                                                                                                                                                                                       |                                                                                                                                                                       |
| 10 PERIOD COVERED                                              | Month Day Year<br>01/01/2025 THROUGH 06/30/2025                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                       |                                                                                                                                                                       |
| 11 ELECTION                                                    | ELECTION DATE<br>Month Day Year                                                                                                                                                                                                                                                                                                                                                                                 | ELECTION TYPE<br><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |                                                                                                                                                                       |

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# SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **SPAC**  
COVER SHEET PG 2

|                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                    |                                                               |                             |                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------|--------------------------------------------------|
| <b>12 COMMITTEE NAME</b><br>CCISD Students First                                                                                                                                                                                                                                                                        |                                                                                                                                                                    | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00088595     |                             |                                                  |
| <b>14 COMMITTEE PURPOSE</b><br><br>(Attach lists on plain paper to complete this report if necessary.)<br><br><input type="checkbox"/> <b>SUPPORT</b><br>(Candidate or Measure)<br><br><input type="checkbox"/> <b>OPPOSE</b><br>(Candidate or Measure)<br><br><input type="checkbox"/> <b>ASSIST</b><br>(Officeholder) | <input type="checkbox"/> Candidate<br><br><input type="checkbox"/> Officeholder                                                                                    | <b>CANDIDATE / OFFICEHOLDER NAME</b>                          |                             |                                                  |
|                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                    | <b>OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)</b> |                             |                                                  |
|                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> <b>Measure</b>                                                                                                                            | <b>BALLOT IDENTIFICATION / #</b>                              |                             | <b>ELECTION DATE</b><br>Month      Day      Year |
|                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                    | <b>DESCRIPTION</b>                                            |                             |                                                  |
| <b>15 CONTRIBUTION TOTALS</b>                                                                                                                                                                                                                                                                                           | <b>1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED</b> |                                                               | \$              \$0.00      |                                                  |
|                                                                                                                                                                                                                                                                                                                         | <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                                                     |                                                               | \$              \$0.00      |                                                  |
| <b>EXPENDITURE TOTALS</b>                                                                                                                                                                                                                                                                                               | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>                                                                                                                  |                                                               | \$              \$0.00      |                                                  |
|                                                                                                                                                                                                                                                                                                                         | <b>4. TOTAL POLITICAL EXPENDITURES</b>                                                                                                                             |                                                               | \$              \$0.00      |                                                  |
| <b>CONTRIBUTION BALANCE</b>                                                                                                                                                                                                                                                                                             | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>                                                                      |                                                               | \$              \$16,305.10 |                                                  |
| <b>OUTSTANDING LOAN TOTALS</b>                                                                                                                                                                                                                                                                                          | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>                                                               |                                                               | \$              \$250.00    |                                                  |

|                                                                                                                                                                                          |                                                         |                                              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|----------------------------------------------|
| <b>16 AFFIDAVIT</b>                                                                                                                                                                      |                                                         |                                              |
| 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. |                                                         |                                              |
| AFFIX NOTARY STAMP / SEAL ABOVE                                                                                                                                                          | Inez Faison<br>_____<br>Signature of Campaign Treasurer |                                              |
| Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.                                        |                                                         |                                              |
| _____<br>Signature of officer administering oath                                                                                                                                         | _____<br>Printed name of officer administering oath     | _____<br>Title of officer administering oath |

**SUBTOTALS - SPAC****FORM SPAC**  
**COVER SHEET PG 3**  
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|--------------------------------------------------|-----------------------------------------------------------|
| <b>17</b> COMMITTEE NAME<br>CCISD Students First | <b>18</b> Filer ID (Ethics Commission Filers)<br>00088595 |
|--------------------------------------------------|-----------------------------------------------------------|

| <b>19</b> SCHEDULE SUBTOTALS<br>NAME OF SCHEDULE                                                                           | SUBTOTAL AMOUNT |
|----------------------------------------------------------------------------------------------------------------------------|-----------------|
| 1. <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                                  | \$              |
| 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 D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION                       | \$              |
| 7. <input type="checkbox"/> SCHEDULE E: LOANS                                                                              | \$              |
| 8. <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                               | \$              |
| 9. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                                       | \$              |
| 10. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                             | \$              |
| 11. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                                 | \$              |
| 12. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH                        | \$              |
| 13. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                           | \$              |
| 14. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ 20.20        |

# 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: 4/4

2 FILER NAME  
CCISD Students First

3 Filer ID (Ethics Commission Filers)  
00088595

4 Date  
06/30/2025

5 Name of person from whom amount is received  
Cadence Bank

8 Amount (\$)  
\$20.20

6 Address of person from whom amount is received; City; State; Zip Code

Copperas Cove, TX 76522

7 Purpose for which amount is received  
Year To Date Interest

☐ Check if political contribution returned to filer