

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) 00070002	2 Total pages filed: 7	
3 COMMITTEE NAME Greater San Antonio Council of TFRW			OFFICE USE ONLY	
			Date Received ELECTRONICALLY FILED 07/14/2025	
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address			ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 171165 San Antonio, TX 78217	
			Date Imaged	
5 CAMPAIGN TREASURER NAME		MS / MRS / MR FIRST MI Marilyn		
		NICKNAME LAST SUFFIX Jowdy		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)		STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2211 Grape Blossom San Antonio, TX 78247		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address		STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 171165 San Antonio, TX 78217		
8 CAMPAIGN TREASURER PHONE		AREA CODE PHONE NUMBER EXTENSION (210) 499-5233		
9 REPORT TYPE		<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> 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 <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special		

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Greater San Antonio Council of TFRW	13 Filer ID (Ethics Commission Filers) 00070002
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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) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 3,285.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,865.67
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,360.51
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.

Marilyn Jowdy

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
3 of 7

17 COMMITTEE NAME Greater San Antonio Council of TFRW		18 Filer ID (Ethics Commission Filers) 00070002
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 3,285.00
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 C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,865.67
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/7
2 FILER NAME Greater San Antonio Council of TFRW		3 Filer ID (Ethics Commission Filers) 00070002
4 Date 01/07/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bexar County RW 6 Contributor address; City; State; Zip Code San Antonio, TX 78216	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camino Real RW Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canyon Lake RW Contributor address; City; State; Zip Code Canyon Lake, TX 78133	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hays County RW Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney County RW Contributor address; City; State; Zip Code Brackettville, TX 78832	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/7
2 FILER NAME Greater San Antonio Council of TFRW		3 Filer ID (Ethics Commission Filers) 00070002
4 Date 01/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luncheon Guests <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78217	7 Amount of Contribution (\$) \$890.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luncheon Guests <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78217	Amount of Contribution (\$) \$1,065.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luncheon Guests <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78217	Amount of Contribution (\$) \$880.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Medina County RW <hr/> Contributor address; City; State; Zip Code Devine, TX 78016	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RW of Kerr County <hr/> Contributor address; City; State; Zip Code Kerrville, TX 78029	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/7
2 FILER NAME Greater San Antonio Council of TFRW		3 Filer ID (Ethics Commission Filers) 00070002
4 Date 01/08/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Antonio RW <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78270	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson County RW <hr/> Contributor address; City; State; Zip Code Adkins, TX 78101	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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
Credit Card Payment

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 7/7	2 FILER NAME Greater San Antonio Council of TFRW	3 Filer ID (Ethics Commission Filers) 00070002
4 Date 01/08/2025	5 Payee name Anne Marie's Catering	
6 Amount (\$) \$840.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 12475 Starcrest San Antonio, TX 78216	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Luncheon Expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/05/2025	Payee name Anne Marie's Catering	
Amount (\$) \$1,158.74 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12475 Starcrest Dr San Antonio, TX 78216	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Luncheon Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/07/2025	Payee name Anne Marie's Catering	
Amount (\$) \$866.93 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 12475 Starcrest Dr San Antonio, TX 78216	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Luncheon Expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held