

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC
COVER SHEET PG 1

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|--|---|--|---|--|
| The GPAC Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00088771 | 2 Total pages filed: 13 | |
| 3 COMMITTEE NAME Democratic Lawyers Association of Texas PAC | | | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 07/15/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged | |
| 4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1414 N Washington Ave Dallas, TX 75204 | | | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR FIRST MI Ross NICKNAME LAST SUFFIX Miller | | | |
| 6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 9920 Gulf Fwy #100 Houston, TX 77034 | | | |
| 7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 9920 Gulf Fwy #100 Houston, TX 77034 | | | |
| 8 CAMPAIGN TREASURER PHONE | AREA CODE PHONE NUMBER EXTENSION (315) 244-1098 | | | |
| 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 checked="" 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 | |

GO TO PAGE 2

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

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|---|---|
| 12 COMMITTEE NAME Democratic Lawyers Association of Texas PAC | 13 Filer ID (Ethics Commission Filers) 00088771 |
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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.) | |
| | | |

| | | |
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| 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) | \$ 990.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ 137.13 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ 668.56 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 1,899.65 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 531.43 |

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.

Ross Miller

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 13

| | | |
|---|---|---|
| 17 COMMITTEE NAME Democratic Lawyers Association of Texas PAC | | 18 Filer ID (Ethics Commission Filers) 00088771 |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 50.00 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 940.00 |
| 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 checked="" type="checkbox"/> SCHEDULE E: LOANS | \$ 531.43 |
| 10. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 668.56 |
| 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: 1/1 Rpt: 4/13 |
| 2 FILER NAME Democratic Lawyers Association of Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00088771 |
| 4 Date 02/05/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Veronica <hr/> 6 Contributor address; City; State; Zip Code St. John, IN 46373 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) N/A | | 9 Employer (See Instructions) N/A |
| Date 02/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Veronica <hr/> Contributor address; City; State; Zip Code St. John, IN 46373 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) N/A | | Employer (See Instructions) N/A |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | | | |
|--|---|--|---|--|--|
| The Instruction Guide explains how to complete this form. | | | | 1 Total pages Schedule A2: Sch: 1/5 Rpt: 5/13 | |
| 2 FILER NAME Democratic Lawyers Association of Texas PAC | | | | 3 Filer ID (Ethics Commission Filers) 00088771 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | | | \$ | |
| 5 Date 01/15/2025 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LGG Group LLC | | 8 Amount of contribution (\$) \$250.00 | | 9 In-kind contribution description Campaign Finance consulting |
| 7 Contributor address; City; State; Zip Code Austin, TX 78729 | | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | |
| Date 04/02/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ross | | Amount of contribution (\$) \$150.00 | | In-kind contribution description City of Houston Report CLE |
| Contributor address; City; State; Zip Code Houston, TX 77034 | | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney | | | Employer (FOR NON-JUDICIAL) (See instructions) | | |
| Contributor's principal occupation (FOR JUDICIAL) | | | Contributor's job title (FOR JUDICIAL) (See instructions) | | |
| Contributor's employer/law firm (FOR JUDICIAL) | | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | |
| Date 04/08/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ross | | Amount of contribution (\$) \$50.00 | | In-kind contribution description Texas Legislative Updates CLE |
| Contributor address; City; State; Zip Code Houston, TX 77034 | | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney | | | Employer (FOR NON-JUDICIAL) (See instructions) | | |
| Contributor's principal occupation (FOR JUDICIAL) | | | Contributor's job title (FOR JUDICIAL) (See instructions) | | |
| Contributor's employer/law firm (FOR JUDICIAL) | | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | | | |
|--|--|--|---|--|---|
| The Instruction Guide explains how to complete this form. | | | | 1 Total pages Schedule A2: Sch: 2/5 Rpt: 6/13 | |
| 2 FILER NAME Democratic Lawyers Association of Texas PAC | | | | 3 Filer ID (Ethics Commission Filers) 00088771 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | | | \$ | |
| 5 Date 01/28/2025 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ross | | 8 Amount of contribution (\$) \$50.00 | | 9 In-kind contribution description The Intricacies of Climate Law CLE |
| 7 Contributor address; City; State; Zip Code Houston, TX 77034 | | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney | | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | |

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|--|---|--|---|--|--|
| Date 01/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ross | | Amount of contribution (\$) \$150.00 | | In-kind contribution description Understanding the Challenges of U.S. Immigration Law CLE |
| Contributor address; City; State; Zip Code Houston, TX 77034 | | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney | | | Employer (FOR NON-JUDICIAL) (See instructions) | | |
| Contributor's principal occupation (FOR JUDICIAL) | | | Contributor's job title (FOR JUDICIAL) (See instructions) | | |
| Contributor's employer/law firm (FOR JUDICIAL) | | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | |

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|--|---|--|---|--|---|
| Date 06/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ross | | Amount of contribution (\$) \$150.00 | | In-kind contribution description Texas Legislative Session Recap CLE |
| Contributor address; City; State; Zip Code Houston, TX 77034 | | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney | | | Employer (FOR NON-JUDICIAL) (See instructions) | | |
| Contributor's principal occupation (FOR JUDICIAL) | | | Contributor's job title (FOR JUDICIAL) (See instructions) | | |
| Contributor's employer/law firm (FOR JUDICIAL) | | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | | | |
|--|--|---|---|--|---|
| The Instruction Guide explains how to complete this form. | | | | 1 Total pages Schedule A2: Sch: 3/5 Rpt: 7/13 | |
| 2 FILER NAME Democratic Lawyers Association of Texas PAC | | | | 3 Filer ID (Ethics Commission Filers) 00088771 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | | | \$ | |
| 5 Date 05/23/2025 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Ross | | 8 Amount of contribution (\$) \$50.00 | | 9 In-kind contribution description The War Against Attorneys and Judges CLE |
| 7 Contributor address; City; State; Zip Code Houston, TX 77034 | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Attorney | | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | |
| Date 06/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosemarie, Clouston | | Amount of contribution (\$) \$15.00 | | In-kind contribution description Action Network Event promotion fee |
| Contributor address; City; State; Zip Code Philadelphia, PA 19125 | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) COO | | | Employer (FOR NON-JUDICIAL) (See instructions) | | |
| Contributor's principal occupation (FOR JUDICIAL) | | | Contributor's job title (FOR JUDICIAL) (See instructions) | | |
| Contributor's employer/law firm (FOR JUDICIAL) | | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | |
| Date 05/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosemarie, Clouston | | Amount of contribution (\$) \$15.00 | | In-kind contribution description Action Network Event promotion fee |
| Contributor address; City; State; Zip Code Philadelphia, PA 19125 | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | | | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) COO | | | Employer (FOR NON-JUDICIAL) (See instructions) | | |
| Contributor's principal occupation (FOR JUDICIAL) | | | Contributor's job title (FOR JUDICIAL) (See instructions) | | |
| Contributor's employer/law firm (FOR JUDICIAL) | | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|--|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 4/5 Rpt: 8/13 | |
| 2 FILER NAME Democratic Lawyers Association of Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00088771 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 04/20/2025 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosemarie, Clouston 7 Contributor address; City; State; Zip Code Philadelphia, PA 19125 | 8 Amount of contribution (\$) \$15.00 | 9 In-kind contribution description Action Network Event promotion fee |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) COO | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 03/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosemarie, Clouston Contributor address; City; State; Zip Code Philadelphia, PA 19125 | Amount of contribution (\$) \$15.00 | In-kind contribution description Action Network Event promotion fee |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) COO | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 02/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosemarie, Clouston Contributor address; City; State; Zip Code Philadelphia, PA 19125 | Amount of contribution (\$) \$15.00 | In-kind contribution description Action Network Event promotion fee |
| | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) COO | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) | | Contributor's job title (FOR JUDICIAL) (See instructions) | |
| Contributor's employer/law firm (FOR JUDICIAL) | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|--|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 5/5 Rpt: 9/13 | |
| 2 FILER NAME Democratic Lawyers Association of Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00088771 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 01/20/2025 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosemarie, Clouston 7 Contributor address; City; State; Zip Code Philadelphia, PA 19125 | 8 Amount of contribution (\$) \$15.00 | 9 In-kind contribution description Action Network Event promotion fee |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) COO | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

LOANS

SCHEDULE E

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule E: Sch: 1/1 Rpt: 10/13 |
| 2 FILER NAME Democratic Lawyers Association of Texas PAC | | 3 Filer ID (Ethics Commission Filers) 00088771 |
| 4 TOTAL OF UNITEMIZED LOANS | | \$ |
| 5 Date of loan 06/30/2025 | 7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Clouston, Rosemarie | 9 Loan Amount (\$) \$531.43 |
| 6 Is lender a financial institution? No | 8 Lender address; City; State; Zip Code Philadelphia, PA 19125 | 10 Interest Rate |
| | | 11 Maturity Date |
| 12 Principal occupation / Job title (See Instructions) COO | | 13 Employer (See Instructions) |
| 14 Description of Collateral <input checked="" type="checkbox"/> None | | 15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/> N/A |
| 16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable | 17 Name of guarantor | 19 Amount Guaranteed (\$) |
| | 18 Guarantor address; City; State; Zip Code | |
| 20 Principal occupation | | 21 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: 1/3 Rpt: 11/13 | 2 FILER NAME Democratic Lawyers Association of Texas PAC | 3 Filer ID (Ethics Commission Filers) 00088771 |
| 4 Date 01/03/2025 | 5 Payee name Mailchimp | |
| 6 Amount (\$) \$47.97 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 405 N Angier Ave. NE Atlanta, GA 30308 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising 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 Email platform |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/03/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Mailchimp | | |
| Amount (\$) \$47.97 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 405 N Angier Ave. NE Atlanta, GA 30308 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising 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 Email platform |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/03/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Mailchimp | | |
| Amount (\$) \$47.97 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 405 N Angier Ave. NE Atlanta, GA 30308 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising 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 Email platform |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/03/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Mailchimp | | |
| Amount (\$) \$47.97 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 405 N Angier Ave. NE Atlanta, GA 30308 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising 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 Email platform |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

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: 2/3 Rpt: 12/13 | 2 FILER NAME Democratic Lawyers Association of Texas PAC | 3 Filer ID (Ethics Commission Filers) 00088771 |
| 4 Date 04/03/2025 | 5 Payee name Mailchimp | |
| 6 Amount (\$) \$47.97 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 405 N Angier Ave. NE Atlanta, GA 30308 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising 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 Email platform |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/03/2025 | Payee name Squarespace | |
| Amount (\$) \$248.40 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 8 Clarkson St. New York, NY 10014 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising 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 Website subscription annual fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/03/2025 | Payee name Squarespace | |
| Amount (\$) \$40.00 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 8 Clarkson St. New York, NY 10014 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising 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 Website domain fee |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

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: 3/3 Rpt: 13/13 | 2 FILER NAME Democratic Lawyers Association of Texas PAC | 3 Filer ID (Ethics Commission Filers) 00088771 |
| 4 Date 01/25/2025 | 5 Payee name Zoom | |
| 6 Amount (\$) \$17.05 <input type="checkbox"/> Expenditure from corporate funds | 7 Payee address; City; State; Zip Code 55 Almaden Boulevard, 6th Floor San Jose, CA 95113 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Meeting platform |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 02/25/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Zoom | | |
| Amount (\$) \$17.05 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 55 Almaden Boulevard, 6th Floor San Jose, CA 95113 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Meeting platform |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 03/25/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Zoom | | |
| Amount (\$) \$17.05 <input type="checkbox"/> Expenditure from corporate funds | Payee address; City; State; Zip Code 55 Almaden Boulevard, 6th Floor San Jose, CA 95113 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Meeting platform |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |