

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) 00016232	2 Total pages filed: 9	
3 COMMITTEE NAME Texas Assn. Of Staffing 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 1401 Lavaca Street PMB 41511 Austin, TX 78701			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI David NICKNAME LAST SUFFIX Anderson			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4309 Yoakum Houston, TX 77006			
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4309 Yoakum Houston, TX 77006			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (713) 521-6563			
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 11/04/2025		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" 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 Texas Assn. Of Staffing PAC		13 Filer ID (Ethics Commission Filers) 00016232
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
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 36,226.50
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 1,390.44
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
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.

David Anderson

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 9

17 COMMITTEE NAME Texas Assn. Of Staffing PAC		18 Filer ID (Ethics Commission Filers) 00016232
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,051.00
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 checked="" type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$ 30,175.50
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	\$ 1,390.44
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: 4/9
2 FILER NAME Texas Assn. Of Staffing PAC		3 Filer ID (Ethics Commission Filers) 00016232
4 Date 04/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, David <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77006	7 Amount of Contribution (\$) \$475.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Anderson Law Firm
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bratton, Pamela <hr/> Contributor address; City; State; Zip Code Dripping Springs , TX 78620	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Staffing		Employer (See Instructions) Meador Staffing
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burnett, Rick <hr/> Contributor address; City; State; Zip Code Houston, TX 77042	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Staffing		Employer (See Instructions) Burnett Specialties
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Jon (CEO) <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Staffing Professional		Employer (See Instructions) Signature Back Office Solutions
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hampton, Mark <hr/> Contributor address; City; State; Zip Code East Ridge, TN 37412	Amount of Contribution (\$) \$576.00
Principal occupation / Job title (See Instructions) Staffing Professional		Employer (See Instructions) Sterling Personnel

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/9
2 FILER NAME Texas Assn. Of Staffing PAC		3 Filer ID (Ethics Commission Filers) 00016232
4 Date 04/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Jennifer <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77406	7 Amount of Contribution (\$) \$325.00
8 Principal occupation / Job title (See Instructions) Staffing Professional		9 Employer (See Instructions) Staff Force
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howard, David <hr/> Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Staff Force Inc.
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huff, Bert <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76302	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Staffing		Employer (See Instructions) MyStaff
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leal, Josh <hr/> Contributor address; City; State; Zip Code Grapevine, TX 76051	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) ABBA Consulting
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minor, Danny <hr/> Contributor address; City; State; Zip Code The Woodlands, TX 77380	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Allegiance Staffing

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/9
2 FILER NAME Texas Assn. Of Staffing PAC		3 Filer ID (Ethics Commission Filers) 00016232
4 Date 04/09/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Clara 6 Contributor address; City; State; Zip Code Magnolia, TX 77354	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) Staffing Professional		9 Employer (See Instructions) Staff Force
Date 04/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sosic, Jeff Contributor address; City; State; Zip Code Brunswick, OH 44212	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Staffing Professional		Employer (See Instructions) Crimcheck

MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C3: Sch: 1/2 Rpt: 7/9
2 FILER NAME Texas Assn. Of Staffing PAC		3 Filer ID (Ethics Commission Filers) 00016232
4 Date 04/09/2025	5 Corporation / Labor Organization name AD Susman & Associates	6 Amount (\$) 500.00
Date 04/09/2025	Corporation / Labor Organization name Allegiance Staffing	Amount (\$) 500.00
Date 04/09/2025	Corporation / Labor Organization name Allegiance Staffing	Amount (\$) 100.00
Date 04/09/2025	Corporation / Labor Organization name Brown & Brown	Amount (\$) 250.00
Date 04/09/2025	Corporation / Labor Organization name Burnett Staffing	Amount (\$) 500.00
Date 04/09/2025	Corporation / Labor Organization name Choice Staffing	Amount (\$) 700.00
Date 04/09/2025	Corporation / Labor Organization name Group	Amount (\$) 500.00
Date 04/09/2025	Corporation / Labor Organization name Hawkins Personnel Group	Amount (\$) 500.00
Date 04/09/2025	Corporation / Labor Organization name Kittrell Staffing	Amount (\$) 662.50
Date 04/09/2025	Corporation / Labor Organization name LK Jordan	Amount (\$) 2,500.00
Date 04/09/2025	Corporation / Labor Organization name LeadingEdge Personnel	Amount (\$) 500.00
Date 04/09/2025	Corporation / Labor Organization name Link Staffing	Amount (\$) 1,000.00
Date 04/09/2025	Corporation / Labor Organization name Link Staffing	Amount (\$) 1,600.00
Date 04/09/2025	Corporation / Labor Organization name MJA Associates	Amount (\$) 1,025.00
Date 04/09/2025	Corporation / Labor Organization name My Staff	Amount (\$) 300.00
Date 04/09/2025	Corporation / Labor Organization name Priscilla Canales	Amount (\$) 1,000.00
Date 04/09/2025	Corporation / Labor Organization name Right Path Insurance	Amount (\$) 1,000.00
Date 04/09/2025	Corporation / Labor Organization name Ryan Reisner	Amount (\$) 3,000.00

MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C3: Sch: 2/2 Rpt: 8/9
2 FILER NAME Texas Assn. Of Staffing PAC		3 Filer ID (Ethics Commission Filers) 00016232
4 Date 04/09/2025	5 Corporation / Labor Organization name Signature Back Office	6 Amount (\$) 500.00
Date 04/09/2025	Corporation / Labor Organization name Skilled Craftsmen of Texas	Amount (\$) 1,000.00
Date 04/09/2025	Corporation / Labor Organization name Skilled Craftsmen of Texas	Amount (\$) 663.00
Date 04/09/2025	Corporation / Labor Organization name Staff Force	Amount (\$) 5,000.00
Date 04/09/2025	Corporation / Labor Organization name Staffing Texas	Amount (\$) 500.00
Date 04/09/2025	Corporation / Labor Organization name Tempworks	Amount (\$) 750.00
Date 04/09/2025	Corporation / Labor Organization name Texas Staffing	Amount (\$) 4,625.00
Date 04/09/2025	Corporation / Labor Organization name Vigilent Sec	Amount (\$) 500.00
Date 04/09/2025	Corporation / Labor Organization name Winsource	Amount (\$) 500.00

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: 9/9	2 FILER NAME Texas Assn. Of Staffing PAC	3 Filer ID (Ethics Commission Filers) 00016232
4 Date 04/09/2025	5 Payee name Bidding Owl	
6 Amount (\$) \$508.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 1531 Gaylord, MI 49734	
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 Silent auction website.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/09/2025	Payee name Paypal	
Amount (\$) \$323.72 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for silent auction payments.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 04/09/2025	Payee name Square Payments	
Amount (\$) \$557.92 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1455 Market Street Suite 600 San Francisco, CA 94103	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing fees for silent auction payments
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held