#### 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) 00042459 3 COMMITTEE NAME **OFFICE USE ONLY** Austin Tejano Democrats PAC Date Received **ELECTRONICALLY FILED** 07/14/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 307 Cottonwood Lane Date Hand-delivered or Date Postmarked Change of Address Pflugerville, TX 78660 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Sylvia NAME NICKNAME LAST **SUFFIX** Camarillo STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 307 Cottonwood Lane STREET **ADDRESS** (Residence or Business) Pflugerville, TX 78660 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 307 Cottonwood Lane MAILING **ADDRESS** Pflugerville, TX 78660 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 784-5810 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** Month Day Year χ Primary Runoff Other 07/15/2025 General Special **GO TO PAGE 2**

# GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM **GPAC** COVER SHEET PG 2

				13 Filer ID	
Austin Tejano Democrat	s PAC	_		000424	159
	1. Candidates	A. Supported			
	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
-	2. Measures	A. Supported			
	(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.)				
			TDIRITIONS (OTHER THAN	1	
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	OR GUARANTEES  ADE ELECTRONIC	CALLY)	\$	0.00
	2. TOTAL POLITICA			\$	C00.00
	(OTHER THAN PLE	EDGES, LOANS, OF	R GUARANTEES OF LOANS)	*	600.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPE	NDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURE	ES	\$	348.54
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTING		MAINTAINED AS OF THE LAST	DAY \$	3,896.88
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE I		DUTSTANDING LOANS AS OF OD	THE \$	0.00
6 AFFIDAVIT					
		true a	ear, or affirm, under penalty of pe and correct and includes all infor er Title 15, Election Code.		
			Culvia	Comorillo	
			Signature of Ca	Camarillo Impaign Tre	asurer
			Signature of Ca	anpaigii iie	usurci
AFFIX NOTARY S	STAMP / SEAL ABOVE				
Sworn to and subscribed I	pefore me, by the said		, t	his the	day
of					
Signature of officer adm	ninistering oath	Printed name of off	ficer administering oath	Title of	officer administering oath

### **SUBTOTALS - GPAC**

# FORM GPAC COVER SHEET PG 3

				3 of	12
<b>17</b> COM	MITTE	E NAME	18 Filer ID	(Ethics Commission Filers	==== 3)
		ano Democrats PAC	00042459	(Earlies Commission Files	"
			00042433	<u> </u>	
		E SUBTOTALS		SUBTOTAL AMOUN	1T
NAME	= OF 8	SCHEDULE			
1.	Χ	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 60	00.00
2.			\$		
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	PR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 34	48.54
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A				
	The Instru	ction Guide explains hov	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 4/12	
2	FILER NAME Austin Tejan	o Democrats PAC			3	Filer ID (Ethics Commission 00042459	ı Filers)
4	4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7  Alter, Ryan  6 Contributor address; City; State; Zip Code  Austin, TX 78745		7	Amount of Contribution (\$)	\$25.00		
8	Principal occu Councilmem	pation / Job title (See Instructions	s)	Employer (See Instructions     COA	<u> </u> s)		
Date Full name of contributor out-of-state PAC (ID#:)  O6/16/2025 Apodaca, Steven  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00			
	Austin, TX 78745  Principal occupation / Job title (See Instructions)  Consultant  Employer (See Instruction TSG Consulting		<u> </u> S)				
	Date Full name of contributor out-of-state PAC (ID#:)  06/16/2025 Burke , Cecilia  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00		
	Data disal asses	Austin, TX 78731		Frankrije (Ozakastian	<u> </u>		
	Retired	pation / Job title (See Instructions	5)	Employer (See Instructions Retired	5)		
Date Full name of contributor out-of-state PAC (ID#:)  Concern, Jessica  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00			
	Principal occu Engineer	Austin, TX 78741 pation / Job title (See Instructions	5)	Employer (See Instructions Aspirus/FRB	<u> </u> S)		
	Date Full name of contributor out-of-state PAC (ID#:)  Denkler, Ann  Contributor address; City; State; Zip Code  Austin, TX 78731			Amount of Contribution (\$)	\$25.00		
	Principal occu Retired	pation / Job title (See Instructions	s)	Employer (See Instructions Retired	s)		
_							

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1				
	The Instru	ction Guide explains how to co	mplete this forr	n.	1	Total pages Schedule A1: Sch: 2/4 Rpt: 5/12	
2	FILER NAME Austin Tejan	o Democrats PAC			3	Filer ID (Ethics Commission 00042459	Filers)
4	4 Date 5 Full name of contributor out-of-state PAC (ID#:) 7  Duchen, Marc  6 Contributor address; City; State; Zip Code  Austin, TX 78759		7	Amount of Contribution (\$)	\$25.00		
8	Principal occu Consultant	Austin, TX 78759 pation / Job title (See Instructions)	9	Employer (See Instructions Self	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  06/17/2025 Escobedo, Norma  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00		
Austin, TX 78745  Principal occupation / Job title (See Instructions)  Retired  Employer (See Instructions)  Retired		<u> </u> 5)					
	Date Full name of contributor out-of-state PAC (ID#:)  06/17/2025 Flores, Lulu (The Honorable)  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
		Austin, TX 78704			_		
	State Repres	pation / Job title (See Instructions) sentative		Employer (See Instructions State of Texas	5)		
Date Full name of contributor out-of-state PAC (ID#:)  06/17/2025 Garza , Gina  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00			
	Principal occu Retired	Austin, TX 78745 pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u> 5)		
Date  O5/21/2025  Full name of contributor out-of-state PAC (ID#:)  Hidrogo, Kimberly  Contributor address; City; State; Zip Code  Austin, TX 78747			Amount of Contribution (\$)	\$25.00			
	Principal occu Assist. Coun	pation / Job title (See Instructions) ty Attorney		Employer (See Instructions Travis County	5)		

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruc	ction Guide explains how to com	plete this forr	n.	1	Total pages Schedule A1: Sch: 3/4 Rpt: 6/12	
2	FILER NAME Austin Tejan	o Democrats PAC			3	Filer ID (Ethics Commission 00042459	ı Filers)
4	Date 06/16/2025			)	7	Amount of Contribution (\$)	\$25.00
		Austin, TX 78701	i				
8	Principal occu Judge	pation / Job title (See Instructions)	9	Employer (See Instructions Travis County	5)		
Date Full name of contributor out-of-state PAC (ID#:)  Offega Carter, Dolores  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00			
	Principal occu	Austin, TX 78727 pation / Job title (See Instructions)		Employer (See Instructions	:)		
County Treasurer Travis County		,					
Date Full name of contributor out-of-state PAC (ID#:)  06/17/2025 Parks, Ciara  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$25.00		
		Manor, TX 78653					
	Principal occu General Cou	pation / Job title (See Instructions) Insel		Employer (See Instructions Travis County	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  01/21/2025 Pittala, Ana  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00		
	Principal occu Retired	Austin, TX 78745 pation / Job title (See Instructions)		Employer (See Instructions	5)		
Date Full name of contributor out-of-state PAC (ID#:)  Roeckle, Charles  Contributor address; City; State; Zip Code  Austin, TX 78751			Amount of Contribution (\$)	\$25.00			
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	()		
			1				

MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1				
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/4 Rpt: 7/12	
2	FILER NAME	a Damagrata DAC			3	Filer ID (Ethics Commission	n Filers)
_		o Democrats PAC	_		Ļ	00042459	
4	Date 06/17/2025	<ul><li>5 Full name of contributor Shea, Brigid</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$25.00
		Austin, TX 78757					
8	Principal occu	pation / Job title (See Instructions	6)	9 Employer (See Instructions	5)		
	County Com	missioner		Travis County			
Date Full name of contributor out-of-state PAC (ID#:)  1/31/2025 Trevino, Rene  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00			
		Austin, TX 78748					
Principal occupation / Job title (See Instructions) Employer (See Instructions		5)					
	Auditor			State of Texas			
	Date Full name of contributor out-of-state PAC (ID#:)  05/26/2025 Vela III, Jose  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
		Austin, TX 78723					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u></u>		
	Retired			na			
	Date 06/17/2025	Full name of contributor Zamarippa Saenz, Lily Contributor address; City; S Austin, TX 78751		)		Amount of Contribution (\$)	\$25.00
	Principal occu Community I	pation / Job title (See Instructions Liasion	s) 	Employer (See Instructions Travis County	5)		
Date Full name of contributor out-of-state PAC (ID#:)  Zamarripa, Hermelinda  Contributor address; City; State; Zip Code  Austin, TX 78751			Amount of Contribution (\$)	\$25.00			
	Principal occu Retired	pation / Job title (See Instructions	s)	Employer (See Instructions Retired	5)		
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### 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 Salaries/Wages/Contract Labor

Dursement Solicitation/Fundraising Expense
Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to co	mplete this f	orm.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 1/5 Rpt: 8/12	Austin Tejano Democrats PAC		00042459	
4 Date	5 Payee name			
06/30/2025	DonateWay			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$22.76	P.O. Box 301267			
Expenditure from corporate funds	Austin, TX 78703			
8 PURPOSE	(-) -	(b) Descrip	ation	
OF	(a) Category (See Categories listed at the top of this schedule)  Fees		otion ck if travel outside of Texas. Com	plete Schedule T.
EXPENDITURE	1 003		ck if Austin, TX, officeholder living	
		Online	e financial platform	
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ight	Office he	eld
expenditure to benefit C/O	<del>1</del>			
Date	Payee name			
06/18/2025	Mail Chimp			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$13.86	405 N angier Ave			
	-			
Expenditure from corporate funds	Atlanta, GA 30308			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descrip	ntion	
OF	Advertising Expense	I — '	ck if travel outside of Texas. Com	plete Schedule T.
EXPENDITURE	riarioritisming Experies	Chec	ck if Austin, TX, officeholder living	g expense
		Email	Platform	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office he	eld
experientare to benefit 6/61	'			
Date	Payee name			
05/18/2025	Mail Chimp			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$13.86	405 N angier Ave			
Evponditure from				
Expenditure from corporate funds	Atlanta, GA 30308			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descrip	otion	
OF EXPENDITURE	Advertising Expense		ck if travel outside of Texas. Com	•
EXI ENDITORE		. –	ck if Austin, TX, officeholder living	g expense
		⊨mall	Platform	
Complete ONII V 35 -15	Condidate/Officeholder name	aht.	O##== 1	71d
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ıynı	Office he	eiu

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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)

Credit Card Payment	The Instruction Guide explains how to co	omplete ti	his form.		
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch: 2/5 Rpt: 9/12	Austin Tejano Democrats PAC			00042459	
4 Date	5 Payee name		I		
04/18/2025	Mail Chimp				
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode			
\$13.86	405 N angier Ave				
Expenditure from corporate funds	Atlanta, GA 30308				
8 PURPOSE		(h) De	scription		
OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense		Check if travel outsid	le of Texas. Com	plete Schedule T.
EXPENDITURE	The state of the s		Check if Austin, TX, o	officeholder living	expense
		Em	nail Platform		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ıght		Office he	eld
experialture to benefit C/O	'				
Date	Payee name				
03/18/2025	Mail Chimp				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$13.86	405 N angier Ave				
Expenditure from corporate funds	Atlanta, GA 30308				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	<b>(b)</b> De	scription		
OF EXPENDITURE	Advertising Expense		Check if travel outsid	le of Texas. Com	plete Schedule T.
EXPENDITORE	• ,		Check if Austin, TX, o	officeholder living	expense
		Em	nail Platform		
	0.51.40%	<u> </u>		O.K. 1	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ıgnt		Office he	ela
Date	Payee name				
02/18/2025	Mail Chimp				
Amount (\$)	Payee address; City; State; Zip Co	ode			
\$13.86	405 N angier Ave				
Expenditure from					
corporate funds	Atlanta, GA 30308				
PURPOSE	(a) Category (See Categories listed at the top of this schedule)		scription		
OF EXPENDITURE	Advertising Expense		Check if travel outsid		•
			Check if Austin, TX, on the control of the control	officenolaer living	expense
			nan i lationni		
Complete ONLY if direct	Candidate/Officeholder name Office sou	laht Iaht		Office he	ald.
expenditure to benefit C/Ol		agi it		Cinice He	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
dvertising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	_
Sch: 3/5 Rpt: 10/12	Austin Tejano Democrats PAC 00042459	
4 Date	5 Payee name	
01/18/2025	Mail Chimp	
6 Amount (\$)	7 Payee address; City; State; Zip Code	_
\$13.86	405 N angier Ave	
Expenditure from corporate funds	Atlanta, GA 30308	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	ſ
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Email Platform	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
		_
Date	Payee name	
01/28/2025	Perez Wiseley, Teresa	
Amount (\$)	Payee address; City; State; Zip Code	
\$139.25	909 Theresa Ave.	
Expenditure from corporate funds	Austin, TX 78703	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Reimbursement Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Reimbursement for gift bags to Travis County	
	legislative delegation	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	
Date	Payee name	=
06/12/2025	Zoom	
Amount (\$)	Payee address; City; State; Zip Code	_
\$18.12	55 Almaden Boulevard, 6th Floor	
410.11	oo / minaaan Baalayaa a, aan naan	
Expenditure from corporate funds	San Jose, CA 95113	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Office Overhead/Rental Expense	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Meeting Platform	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	
		_

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/5 Rpt: 11/12	Austin Tejano Democrats PAC 00042459
4 Date	5 Payee name
05/12/2025	Zoom
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$17.05	55 Almaden Boulevard, 6th Floor
Expenditure from	San Jose, CA 95113
corporate funds	San 305e, CA 95115
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
2A 2H3H3H2	Check if Austin, TX, officeholder living expense
	Meeting Platform
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/12/2025	Zoom
Amount (\$)	Payee address; City; State; Zip Code
` '	
\$17.05	55 Almaden Boulevard, 6th Floor
Expenditure from	
corporate funds	San Jose, CA 95113
PURPOSE	(a) Category (See Categories listed at the top of this schedule)  (b) Description
OF	, (ess same same same same same same same s
EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Meeting Platform
0 1: 0.11.7.7.1	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/12/2025	Zoom
Amount (\$)	Payee address; City; State; Zip Code
\$17.05	55 Almaden Boulevard, 6th Floor
Expenditure from corporate funds	San Jose, CA 95113
•	1
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Pental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Meeting Platform
	Wiccumg Fladoffff
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

#### 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
OTHER (orbor, each orange, pet listed above)

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/5 Rpt: 12/12	Austin Tejano Democrats PAC 00042459
4 Date	5 Payee name
02/12/2025	Zoom
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$17.05	55 Almaden Boulevard, 6th Floor
Expenditure from corporate funds	San Jose, CA 95113
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Meeting Platform
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	
Date	Payee name
01/12/2025	Zoom
Amount (\$)	Payee address; City; State; Zip Code
\$17.05	55 Almaden Boulevard, 6th Floor
Expenditure from	Can Jana 04 05440
corporate funds	San Jose, CA 95113
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Meeting Platform
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	