#### 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) 00068703 3 COMMITTEE NAME **OFFICE USE ONLY** Leadership for Educational Equity - Texas Date Received **ELECTRONICALLY FILED** 07/15/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 800 N King Street Date Hand-delivered or Date Postmarked Suite 304 - 4181 Change of Address Wilmington, DE 19801 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Christine NAME NICKNAME LAST **SUFFIX** Green STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 800 N King Street STREET **ADDRESS** Suite 304 - 4181 (Residence or Business) Wilmington, DE 19801 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 800 N King Street MAILING **ADDRESS** Suite 304 - 4181 Wilmington, DE 19801 X Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (202) 734-3716 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** 04/24/2025 06/30/2025 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

## FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Leadership for Educat	ional Equity - Texas		0006870	3
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Dolores Lozano Justice of the	Peace	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	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	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)  t qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICATION (OTHER THAN PLE	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	100,000.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	28,986.59
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST IG PERIOD	DAY \$	155,515.43
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	•		<u>'</u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Christin	ie Green	
		Signature of Car	mpaign Treas	surer
AFFIX NOTAR	Y STAMP / SEAL ABOVE			
Sworn to and subscribe	d before me, by the said _	, t	nis the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of of	ficer administering oath

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

### FORM GPAC ADDENDUM

Page 3 of 14

12	COMMITTEE NAME					13 Filer ID (Ethics	Commission Filers)
	Leadership for Educatio	nal Equity - Texas				00068703	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Salvador Serra	no San Jacinto C	college Board of Truste	ees
	(Attach lists on plain paper to complete this report if necessary.)		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.)					
	COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Amy Hinojosa	Pasadena City Co	ouncil	
	(Attach lists on plain paper to complete this report if necessary.)		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.)					
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Lesley Guilmar	Cy-Fair ISD Sch	nool Board	
	(Attach lists on plain paper to complete this report if necessary.)		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.)					
		approado, oucon, by party.					

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

### FORM GPAC ADDENDUM

Page 4 of 14

								1 ago 1 or ± 1
12	COMMITTEE NAME						13 Filer ID	(Ethics Commission Filers)
	Leadership for Educatio	nal Equity - Texas					00068703	
14	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Supported	Sukhdeep Kaur Sa	an Antonio Cit	y Council	
	(Attach lists on plain paper to complete this report if necessary.)		B.	Opposed				
		Measures     (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.)	)					
	COMMITTEE	1. Candidates	A.	Supported	Tyler Smith State	Representativ	e	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)			Tylor Cimer Clare	r coprocontait		
	(Attach lists on plain paper to complete this report if necessary.)		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.)	1					
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A.	Supported	Leah Hanany El P	aso ISD Trust	ree	
	(Attach lists on plain paper to complete this report if necessary.)		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.)						
			)					

### **GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE**

### FORM GPAC **ADDENDUM**

				Page 5 01 14
_			13 Filer ID	(Ethics Commission Filers)
nal Equity - Texas			00068703	
1. Candidates (Identify by name or, if applicable, classify by party.)		Benjamin Mackey Dallas ISI	O School Board	
	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.)				
		Potrioio Cobrara CDICD C. I	and Doord	
(Identify by name or, if		Patricia Cabrera SBISD Sch	iooi Board	
	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				
радионата, опазону бу разгу-у				
	1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders     Assisted (Identify by name or, if applicable, classify by party.)  1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders     Assisted (Identify by name or, if	1. Candidates (Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  A. Supported  B. Opposed  B. Opposed  3. Officeholders Assisted  A. Supported  B. Opposed	1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  A. Supported  Patricia Cabrera SBISD Sch  B. Opposed  A. Supported  Patricia Cabrera SBISD Sch  B. Opposed  B. Opposed  3. Officeholders Assisted (Describe by date and location of election and nature of issue.)  B. Opposed  B. Opposed	nal Equity - Texas  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  A. Supported  Patricia Cabrera SBISD School Board  Describe by date and location of election and nature of issue.)  B. Opposed  A. Supported  Describe by date and location of election and nature of issue.)  B. Opposed  A. Supported  Describe by date and location of election and nature of issue.)  B. Opposed

### **SUBTOTALS - GPAC**

## FORM **GPAC**COVER SHEET PG 3

				6	6 of 14
17 COMN		<b>18</b> Filer ID 00068703	(Ethics Commission F	ilers)	
19 SCHE	DULE	E SUBTOTALS SCHEDULE		SUBTOTAL AMO	DUNT
1. [	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 100	0,000.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	TION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGA		\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	DRGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 28	8,986.59
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.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	190.00

IONET	ARY POLITICAL CONTRIBI	UTIONS	SCHEDULE A1
ne Instru	ction Guide explains how to complete	this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 7/14
ER NAME			3 Filer ID (Ethics Commission Filers) 00068703
ite J/28/2025	<ul> <li>Full name of contributor</li></ul>	7 Amount of Contribution (\$) \$100,000.0	
inginal and	New York, NY 10004	O Franksia (Con Instruction	
incipal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	ns)
- - - - - - - - - - - - - - - - - - -	ER NAME adership 1 te /28/2025	LER NAME adership for Educational Equity - Texas  te	te //28/2025  5 Full name of contributor out-of-state PAC (ID#:) Leadership PAC  6 Contributor address; City; State; Zip Code  New York, NY 10004

#### 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 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 complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/6 Rpt: 8/14	Leadership for Educational Equity - Texas 00068703
4 Date	5 Payee name
05/29/2025	Amalgamated Bank
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$111.50	275 7th Ave
Expenditure from corporate funds	New York, NY 10001
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense  Bank Fees
	Daily rees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
04/25/2025	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$97.00	275 7th Ave
ψ97.00	213 Tut Ave
Expenditure from corporate funds	New York, NY 10001
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Bank Fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
04/25/2025	Amalgamated Bank
Amount (\$)	Payee address; City; State; Zip Code
\$109.00	275 7th Ave
Expenditure from corporate funds	New York, NY 10001
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Bank Fees
Complete CNII V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	<b>y</b>

#### 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

Candidate/Officeholder/Politica Credit Card Payment		
Credit Card r dyment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 2/6 Rpt: 9/14	Leadership for Educational Equity - Texas 00068703	
4 Date	5 Payee name	
05/19/2025	Amy Hinojosa Campaign	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$2,500.00	4808 Fairmont Pkwy # 337	
Expenditure from corporate funds	Pasadena, TX 77505	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Contributions/Donations Made By	
EXPENDITURE	Candidate/Officeholder/Political Committee	
	Contribution	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	4	
Date	Payee name	=
04/29/2025	Ben Mackey for for Dallas ISD	
Amount (\$)	Payee address; City; State; Zip Code	_
\$1,000.00	3710 Virginia Blvd	
Expenditure from corporate funds	Dallas, TX 75211	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Contributions/Donations Made By	
EXPENDITURE	Candidate/Officeholder/Political Committee	
	Contribution	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	1	
Date	Payee name	
04/29/2025	Campaign to Elect Leah Hanany	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	1218 Stockwell Ln	
Expenditure from corporate funds	El Paso, TX 79902	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Candidate/Officeholder/Political Committee	
	Contribution	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	-	
		_

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rtising 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (orbits a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/6 Rpt: 10/14	Leadership for Educational Equity - Texas 00068703
4 Date	5 Payee name
05/09/2025	Darrin Camilleri For State Senate
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code PO Box 818
, , , , , , , , ,	
Expenditure from corporate funds	Trenton, MI 48183
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/30/2025	Dolores Lozano, Justice of the Peace 2026
Amount (\$)	Payee address; City; State; Zip Code
\$4,000.00	PO Box 750861
Expenditure from corporate funds	Houston, TX 77275
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/06/2025	Dolores Lozano, Justice of the Peace 2026
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 750861
— Foresediture from	
Expenditure from corporate funds	Houston, TX 77275
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Contribution
Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

#### SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		Expens Wages	se s/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 4/6 Rpt: 11/14		Leadership	for Educational	Equity - Tex	xas				00068703	
4	Date	5	Payee name								
	06/13/2025			r Attorney Gene	ral						
6	Amount (\$)	7	Payee addre	ss; City;	State:	Zip Co	ode				
	\$2,500.00		•	.dium Blvd # 200	•						
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
	Expenditure from corporate funds		Ann Arbor,	MI 48103							
8	PURPOSE	(a)	Category (Se	ee Categories listed at t	ne top of this sch	edule)	(b)	Description			
	OF EXPENDITURE			ns/Donations Ma				=		de of Texas. Com	
			Candidate/0	Officeholder/Poli	tical Comm	ittee		Contribution	, TX,	officeholder living	expense
								Continuation			
_							<u> </u>				
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offi	ceholder name	C	Office sou	ught			Office he	eld
	Date		Payee name								
	05/09/2025		Friends of S	Sukh							
	Amount (\$)	H	Payee addre	ss; City;	State;	Zip Co	ode				
	\$500.00		814 W Crai	g Pl							
	Expenditure from corporate funds		San Antonio	o, TX 78212							
	PURPOSE	(a)	Category (Se	ee Categories listed at t	ne top of this sch	edule)	(b)	Description			
	OF EXPENDITURE			ns/Donations Ma				<b>=</b>		de of Texas. Com	
			Candidate/0	Officeholder/Poli	tical Comm	ittee		Contribution	, TX,	officeholder living	expense
								Continbution			
	Opening to ONII Wife disease	<u> </u>	)1: -1 - t - 10ff			N(f)				O#: I	.1.4
	Complete ONLY if direct expenditure to benefit C/OH		Jandidate/Offi	ceholder name	C	Office sou	ugnt			Office he	eid
	Date		Payee name								
	06/10/2025		Leadership	for Educational	Equity						
	Amount (\$)		Payee addre	ss; City;	State;	Zip Co	ode				
	\$169.09		25 Broadwa	y, 13th Floor							
	Expenditure from corporate funds		New York, I	NY 10004							
	PURPOSE	(a)	Category (Se	ee Categories listed at t	ne top of this sch	edule)	(b)	Description			
	OF			head/Rental Exp		,		Check if travel	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE			·						officeholder living	expense
								Admin Expen	ses	5	
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ught			Office he	eld
	expenditure to benefit C/OI	_							_		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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
1 Total pages Schedule F1:	
Sch: 5/6 Rpt: 12/14	Leadership for Educational Equity - Texas 00068703
4 Date	5 Payee name
05/09/2025	Lesley Guilmart for CFISD Trustee
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	16635 Spring Cypress Rd # 88
Expenditure from corporate funds	Cypress, TX 77429
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
D-1-	
Date	Payee name
04/29/2025	Patricia Cabrera for SBISD Trustee
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	1407 Lynnview Dr
- For and there from	
Expenditure from corporate funds	Houston, TX 77055
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
06/06/2025	Salvador Serrano Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,000.00	3207 Preston Ave
Ψ2,000.00	3201 1 Testoff / We
Expenditure from	December TV 77505
corporate funds	Pasadena, TX 77505
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	<b>y</b>
•	

### 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 (enter a category not listed above)

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: 6/6 Rpt: 13/14	Leadership for Educational Equity - Texas 00068703
4 Date 05/09/2025	5 Payee name Salvador Serrano Campaign
6 Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 3207 Preston Ave
Expenditure from corporate funds	Pasadena, TX 77505
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/07/2025	Tyler Smith Campaign
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 56386
Expenditure from corporate funds	Houston, TX 77256
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 14/14 3 Filer ID (Ethics Commission Filers) 2 FILER NAME Leadership for Educational Equity - Texas 00068703 5 Name of person from whom amount is received 8 Amount (\$) 05/27/2025 \$190.00 Amalgamated Bank 6 Address of person from whom amount is received; City; State; Zip Code New York, NY 10001 Purpose for which amount is received Check if political contribution returned to filer Refund of Fees