

# 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<br>(Ethics Commission Filers)<br>00086388 | 2 Total pages filed:<br>3                                                                                                                                                                                                                                                                                                                            |        |
| 3 COMMITTEE NAME<br>Champions for Business                                             |  |                                                      | <b>OFFICE USE ONLY</b>                                                                                                                                                                                                                                                                                                                               |        |
|                                                                                        |  |                                                      | Date Received<br>ELECTRONICALLY FILED<br>07/15/2025                                                                                                                                                                                                                                                                                                  |        |
|                                                                                        |  |                                                      | Date Hand-delivered or Date Postmarked                                                                                                                                                                                                                                                                                                               |        |
|                                                                                        |  |                                                      | Receipt #                                                                                                                                                                                                                                                                                                                                            | Amount |
|                                                                                        |  |                                                      | Date Processed                                                                                                                                                                                                                                                                                                                                       |        |
| 4 COMMITTEE ADDRESS<br><br><input type="checkbox"/> Change of Address                  |  |                                                      | ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>1500 Broadway, Ste. 101<br><br>Lubbock, TX 79401                                                                                                                                                                                                                                           |        |
| 5 CAMPAIGN TREASURER NAME                                                              |  |                                                      | MS / MRS / MR FIRST MI<br>Mrs. Victoria<br><br>NICKNAME LAST SUFFIX<br>Whitehead                                                                                                                                                                                                                                                                     |        |
| 6 CAMPAIGN TREASURER STREET ADDRESS<br>(Residence or Business)                         |  |                                                      | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br>5001 West Loop 289, Ste. 305<br><br>Lubbock, TX 79414                                                                                                                                                                                                                     |        |
| 7 CAMPAIGN TREASURER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address |  |                                                      | STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE<br>PO Box 93092<br><br>Lubbock, TX 79493                                                                                                                                                                                                                                                      |        |
| 8 CAMPAIGN TREASURER PHONE                                                             |  |                                                      | AREA CODE PHONE NUMBER EXTENSION<br>8063167990                                                                                                                                                                                                                                                                                                       |        |
| 9 REPORT TYPE                                                                          |  |                                                      | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR)<br><input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination<br><input type="checkbox"/> Runoff |        |
| 10 PERIOD COVERED                                                                      |  |                                                      | Month Day Year<br>04/24/2025 THROUGH Month Day Year<br>06/30/2025                                                                                                                                                                                                                                                                                    |        |
| 11 ELECTION                                                                            |  |                                                      | ELECTION DATE<br>Month Day Year<br><br>ELECTION TYPE<br><input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><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

|                                                                                                         |                                                                                                      |                                                                                                                                                                                                                                                   |
|---------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>12 COMMITTEE NAME</b><br>Champions for Business                                                      |                                                                                                      | <b>13 Filer ID</b> (Ethics Commission Filers)<br>00086388                                                                                                                                                                                         |
| <b>14 COMMITTEE ACTIVITY</b><br><br>(Attach lists on plain paper to complete this report if necessary.) | <b>1. Candidates</b><br>(Identify by name or, if applicable, classify by party.)                     | A. Supported                                                                                                                                                                                                                                      |
|                                                                                                         |                                                                                                      | B. Opposed                                                                                                                                                                                                                                        |
|                                                                                                         | <b>2. Measures</b><br>(Describe by date and location of election and nature of issue.)               | A. Supported                                                                                                                                                                                                                                      |
|                                                                                                         |                                                                                                      | B. Opposed                                                                                                                                                                                                                                        |
|                                                                                                         | <b>3. Officeholders Assisted</b><br>(Identify by name or, if applicable, classify by party.)         |                                                                                                                                                                                                                                                   |
|                                                                                                         | <b>15 CONTRIBUTION TOTALS</b>                                                                        | <b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b><br><input type="checkbox"/> check here if this report qualifies for the higher itemization threshold |
|                                                                                                         | <b>2. TOTAL POLITICAL CONTRIBUTIONS</b><br>(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)       | \$ 0.00                                                                                                                                                                                                                                           |
| EXPENDITURE TOTALS                                                                                      | <b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>                                                    | \$ 0.00                                                                                                                                                                                                                                           |
|                                                                                                         | <b>4. TOTAL POLITICAL EXPENDITURES</b>                                                               | \$ 0.00                                                                                                                                                                                                                                           |
| CONTRIBUTION BALANCE                                                                                    | <b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>        | \$ 10,595.95                                                                                                                                                                                                                                      |
| OUTSTANDING LOAN TOTALS                                                                                 | <b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b> | \$ 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.

Mrs. Victoria Whitehead  
\_\_\_\_\_  
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 3

|                                                    |                                                                                                                   |                                                           |
|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>17 COMMITTEE NAME</b><br>Champions for Business |                                                                                                                   | <b>18 Filer ID</b> (Ethics Commission Filers)<br>00086388 |
| <b>19 SCHEDULE SUBTOTALS</b><br>NAME OF SCHEDULE   |                                                                                                                   | SUBTOTAL AMOUNT                                           |
| 1.                                                 | <input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                            | \$                                                        |
| 2.                                                 | <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                              | \$                                                        |
| 3.                                                 | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS                                                        | \$                                                        |
| 4.                                                 | <input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION               | \$                                                        |
| 5.                                                 | <input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION | \$                                                        |
| 6.                                                 | <input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                     | \$                                                        |
| 7.                                                 | <input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION                 | \$                                                        |
| 8.                                                 | <input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION                 | \$                                                        |
| 9.                                                 | <input type="checkbox"/> SCHEDULE E: LOANS                                                                        | \$                                                        |
| 10.                                                | <input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                         | \$                                                        |
| 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       | \$                                                        |