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) 00086559 3 COMMITTEE NAME **OFFICE USE ONLY** A Better Dallas Date Received **ELECTRONICALLY FILED** 07/15/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 7030 Wakefield St. Date Hand-delivered or Date Postmarked Change of Address Dallas, TX 75231 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Christopher A. NAME NICKNAME LAST **SUFFIX** Klement STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 7030 Wakefield St. STREET **ADDRESS** (Residence or Business) Dallas, TX 75231 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 7030 Wakefield St. MAILING **ADDRESS** Dallas, TX 75231 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (940) 300-3675 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 χ Primary Runoff Other 03/03/2026 General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME 13 File	r ID (Ethics Commission Filers)
A Better Dallas 000	86559
1. Candidates ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) A. Supported Republican	
(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.)	
1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) 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)	\$ 100.00
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS	\$ 0.00
4. TOTAL POLITICAL EXPENDITURES	\$ 1,353.83
CONTRIBUTION BALANCE 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 14,990.61
OUTSTANDING LOAN TOTALS 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00
L6 AFFIDAVIT	
I swear, or affirm, under penalty of perjury, th true and correct and includes all information i under Title 15, Election Code.	
Mr. Christopher A. Ł	Klement
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	e of officer administering oath

GENERAL-PURPOSE COMMITTEE REPORT:

FORM GPAC

				ADDENDUM
				Page 3 of 11
			13 Filer ID	(Ethics Commission Filers)
			00086559	
Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		1	
	B. Opposed			
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
	B. Opposed			
Officeholders Assisted		Republican		
(Identify by name or, if				
	(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.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed B. Opposed	(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 B. Opposed A. Supported Republican	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 B. Opposed A. Supported A. Supported Republican

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

18 Filer ID 00086559	(Ethics Commis	sion Filers)
00086559	SUBTOTA	
•	SUBTOTA	
		L AMOUNT
	\$	100.00
	\$	0.00
	\$	0.00
OR	\$	
ATION OR	\$	
SANIZATION	\$	
?	\$	
ORGANIZATION	\$	
	\$	0.00
IS	\$	1,353.83
	\$	0.00
ONS	\$	0.00
	\$	0.00
ONS	\$	
RETURNED	\$	
	ATION OR GANIZATION ORGANIZATION IS ONS	\$ DR \$ ATION OR \$ ATION OR \$ ANIZATION \$ CANIZATION \$ SANIZATION \$ SA

	MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 5/11
2	FILER NAME A Better Dallas	3 Filer ID (Ethics Commission Filers) 00086559
4	Date 06/11/2025 5 Full name of contributor out-of-state PAC (ID#:) Arceneaux, Paul 6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$50.00
Ω	Dallas, TX 75214 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	ione
0	Owner Self employed	ions)
	Date Full name of contributor out-of-state PAC (ID#:) Rivas, Jose Contributor address; City; State; Zip Code Dallas, TX 75227	Amount of Contribution (\$) \$50.0
	Principal occupation / Job title (See Instructions) Ombudsman Employer (See Instructions) State of Texas	ions)

PLE	OGED CONTRIBU	TIONS			SCHEDULE B
The Instruction Guide explains how to complete this form.					Total pages Schedule B: Sch: 1/1 Rpt: 6/11
	2 FILER NAME A Better Dallas				Filer ID (Ethics Commission Filers) 00086559
4 TOTAL	OF UNITEMIZED PLEDO	GES			\$ 0.
5 Date	7 Pledgor Address; City; State; Zip Code			8	Amount of pledge (\$)
	i (31 iii (6 1 i		Tag]	Check if travel outside of Texas. Complete Schedu
10 Principal	occupation / Job title (See Instru	ictions)	11 Employer (See In	structi	ions)

LOANS				SCHEDU	JLE E	
The Instruction Guide explains how to complete this form.				1 Total pages Schedule E: Sch: 1/1 Rpt: 7/11		
FILER NAME A Better Dallas			3 Filer ID 00086	(Ethics Commission 559	n Filers)	
4 TOTAL OF UNITEMIZED LOANS				\$	0.00	
5 Date of loan 7 Name of lender	out-of-state PA	AC (ID#:		9 Loan Amount (\$)	
6 Is lender a financial institution? 8 Lender address; City	y; State;	Zip Code		10 Interest Rate		
				11 Maturity Date		
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions	5)			
14 Description of Collateral None		15 Check if personal funds we	ere deposite	d into political accoun (See Instruction:		
16 GUARANTOR INFORMATION 17 Name of guarantor				19 Amount Guaran	teed (\$)	
not applicable 18 Guarantor address; City	y; State;	Zip Code				
20 Principal occupation		21 Employer (See Instructions	s)	1		

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

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

Credit Card Payment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
Sch: 1/4 Rpt: 8/11	A Better Dallas	00086559
4 Date	5 Payee name	•
05/22/2025	BallotBrain	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$1,094.94	5900 Balcones Drive	
Expenditure from corporate funds	Austin, TX 78731	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Text campaign
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Luaht Office held
expenditure to benefit C/O		eg Cino nou
Data	Davis and a	
Date 06/02/2025	Payee name Best Name Badges	
	9	
Amount (\$)	Payee address; City; State; Zip C	ode
\$75.83	1700 NW 65th Ave	
Expenditure from	Ste 4	
corporate funds	Plantation, FL 33313	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Gift/Awards/Memorials Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Name tags
		Name tags
Complete ONLY if direct	Candidate/Officeholder name Office so	Lught Office held
expenditure to benefit C/Ol		ag Onioc nou
Data	D	
Date 05/22/2025	Payee name	
05/23/2025	Canva Pty Ltd.	
Amount (\$)	Payee address; City; State; Zip C	ode
\$12.99	110 Kippax St. NSW 2010	
Expenditure from		
corporate funds	Surry Hills 2010 Australia	
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 Subscription fee
		Subscription ree
Complete ONII V Station	Condidate/Officeholder reces	robt Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught 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

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	Il 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: 2/4 Rpt: 9/11	A Better Dallas 00086559
4 Date	5 Payee name
06/23/2025	Canva Pty Ltd.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$12.99	110 Kippax St. NSW 2010
- Evpanditura from	
Expenditure from corporate funds	Surry Hills 2010 Australia
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 Subscription fee
	Subscription lee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
5.	
Date	Payee name
05/20/2025	Intuit Mailchimp
Amount (\$)	Payee address; City; State; Zip Code
\$20.79	405 N Angier Ave. NE
Evpanditura from	
Expenditure from corporate funds	Atlanta, GA 30308
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
	Subscription fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
06/20/2025	Intuit Mailchimp
Amount (\$)	Payee address; City; State; Zip Code
\$20.79	405 N Angier Ave. NE
Expenditure from	
corporate funds	Atlanta, GA 30308
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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Subscription fee
Complete Chill V if all a	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
, ,	

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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	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: 3/4 Rpt: 10/11	A Better Dallas 00086559
4 Date	5 Payee name
05/18/2025	NationBuilder
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$55.00	PO Box 811428
— Forest dit us from	
Expenditure from corporate funds	Los Angeles, CA 90081
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 Web hosting fee
	web hosting lee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
06/18/2025	NationBuilder
Amount (\$)	Payee address; City; State; Zip Code
\$55.00	PO Box 811428
— Forestitus from	
Expenditure from corporate funds	Los Angeles, CA 90081
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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Web hosting fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/03/2025	NationBuilder
Amount (\$)	Payee address; City; State; Zip Code
\$2.75	PO Box 811428
Expenditure from corporate funds	Los Angeles, CA 90081
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.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Item processing fee
0 1. 6	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	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

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributing Donations Made By Candidate/Officeholder/Politica Credit Card Payment	- Gift/A Committee Legal	Beverage Expense wards/Memorials Expense Services Instruction Guide explain		nse es/Contract Labor	Travel in District Travel Out of District OTHER (enter a ca	ict ategory not listed above)
1	Total pages Schedule F1:	2 FILER NAME				3 Filer ID	(Ethics Commission Filers)
	Sch: 4/4 Rpt: 11/11	A Better Dallas				00086559	
4	Date	5 Payee name					
	06/13/2025	NationBuilder					
6	Amount (\$)	7 Payee address;	City; Star	te; Zip Code			
	\$2.75	PO Box 811428					
	Expenditure from corporate funds	Los Angeles, CA	A 90081				
8	PURPOSE	(a) Category (See Cat	egories listed at the top of this s	schedule) (b) Description		
	OF EXPENDITURE	Fees				outside of Texas. Comple	
					_	, TX, officeholder living e	xpense
					Item processi	ing iee	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeho	lder name	Office sough	t	Office held	d