

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) 00080175	2 Total pages filed: 19	
3 COMMITTEE NAME Metrocrest Democrats			OFFICE USE ONLY	
			Date Received ELECTRONICALLY FILED 08/04/2025	
			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 P.O. Box 476 Coppell, TX 75019			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Steven A. NICKNAME LAST SUFFIX Zatyko			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2226 BunkerHill Drive Carrollton, TX 75006			
7 CAMPAIGN TREASURER MAILING ADDRESS <input checked="" type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 970 Laguna Dr. Coppell, TX 75019			
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 926-9024			
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 checked="" type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff			
10 PERIOD COVERED	Month Day Year 01/01/2025 THROUGH 06/30/2025			
11 ELECTION	ELECTION DATE Month Day Year 06/30/2025		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special Semi-annual report	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Metrocrest Democrats		13 Filer ID (Ethics Commission Filers) 00080175
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)	\$ 1,080.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,139.18
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.

Mr. Steven A. Zatyko

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 19

17 COMMITTEE NAME Metrocrest Democrats		18 Filer ID 00080175	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	1,080.00
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 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 checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	782.65
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: 1/7 Rpt: 4/19
2 FILER NAME Metrocrest Democrats		3 Filer ID (Ethics Commission Filers) 00080175
4 Date 03/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anyiam, Chika <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75374	7 Amount of Contribution (\$) \$70.00
8 Principal occupation / Job title (See Instructions) Judge		9 Employer (See Instructions) Dallas County
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anyiam, Chika <hr/> Contributor address; City; State; Zip Code Dallas, TX 75374	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Dallas County
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bazleh, Fatemeh <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berger, Judy <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 01/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Book, Robert <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/7 Rpt: 5/19
2 FILER NAME Metrocrest Democrats		3 Filer ID (Ethics Commission Filers) 00080175
4 Date 02/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breden, Stephen 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erb, Kelly Contributor address; City; State; Zip Code Plano, TX 75093	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Advisor		Employer (See Instructions) UTD
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Froemming, Maria Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Deputy Campaign Mge		Employer (See Instructions) Cassandra for Texas
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemp, Victoria Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemp, Victoria Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/7 Rpt: 6/19
2 FILER NAME Metrocrest Democrats		3 Filer ID (Ethics Commission Filers) 00080175
4 Date 01/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyon, Kay Lynn (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Farmers Branch, TX 75244	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) KayLynn's Dance		9 Employer (See Instructions) Dance Instructor
Date 01/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maurer, Seda <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 02/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDowell, Janet <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) retired CPA		Employer (See Instructions) Retired
Date 02/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munoz, Patricia (Ms.) <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75028	Amount of Contribution (\$) \$95.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 03/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivo, Andy <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75006	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Olivo Law

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/7 Rpt: 7/19
2 FILER NAME Metrocrest Democrats		3 Filer ID (Ethics Commission Filers) 00080175
4 Date 01/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Kimmy <hr/> 6 Contributor address; City; State; Zip Code Farmers Branch, TX 75234	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Paralegal		9 Employer (See Instructions) Wilson Elser Moskowitz Edelman & Dicker LLP
Date 02/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Springer, Gary (Mr.) <hr/> Contributor address; City; State; Zip Code Farmers Branch, TX 75244	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 01/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trahan, Luke <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) Dunkin Donuts
Date 02/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trahan, Luke <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) Dunkin Donuts
Date 03/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trahan, Luke <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) Dunkin Donuts

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/7 Rpt: 8/19
2 FILER NAME Metrocrest Democrats		3 Filer ID (Ethics Commission Filers) 00080175
4 Date 04/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trahan, Luke <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78705	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Cashier		9 Employer (See Instructions) Dunkin Donuts
Date 05/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trahan, Luke <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) Dunkin Donuts
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trahan, Luke <hr/> Contributor address; City; State; Zip Code Austin, TX 78705	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Cashier		Employer (See Instructions) Dunkin Donuts
Date 02/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trosin, Price <hr/> Contributor address; City; State; Zip Code Dallas, TX 75234	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) JLL
Date 01/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) ZATYKO, STEVEN <hr/> Contributor address; City; State; Zip Code COPPELL, TX 75019	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) IT Consultant		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/7 Rpt: 9/19
2 FILER NAME Metrocrest Democrats		3 Filer ID (Ethics Commission Filers) 00080175
4 Date 01/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamorano, Wanda 6 Contributor address; City; State; Zip Code Irving, TX 75063	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamorano, Wanda Contributor address; City; State; Zip Code Irving, TX 75063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 03/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamorano, Wanda Contributor address; City; State; Zip Code Irving, TX 75063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 04/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamorano, Wanda Contributor address; City; State; Zip Code Irving, TX 75063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 05/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamorano, Wanda Contributor address; City; State; Zip Code Irving, TX 75063	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/7 Rpt: 10/19
2 FILER NAME Metrocrest Democrats		3 Filer ID (Ethics Commission Filers) 00080175
4 Date 02/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) de la Vega, Benny <hr/> 6 Contributor address; City; State; Zip Code Farmers Branch, TX 75234	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Kennel owner		9 Employer (See Instructions) Self

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/9 Rpt:	2 FILER NAME Metrocrest Democrats	3 Filer ID (Ethics Commission Filers) 00080175
4 Date 01/01/2025	5 Payee name ActBlue Discounts	
6 Amount (\$) 1.19 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 01/06/2025	Payee name ActBlue Discounts	
Amount (\$) 0.20 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 01/11/2025	Payee name ActBlue Discounts	
Amount (\$) 2.37 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 01/13/2025	Payee name ActBlue Discounts	
Amount (\$) 0.40 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/9 Rpt:	2 FILER NAME Metrocrest Democrats	3 Filer ID (Ethics Commission Filers) 00080175
4 Date 01/13/2025	5 Payee name ActBlue Discounts	
6 Amount (\$) 1.19 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 01/13/2025	Payee name ActBlue Discounts	
Amount (\$) 4.74 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 01/13/2025	Payee name ActBlue Discounts	
Amount (\$) 2.37 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 01/26/2025	Payee name ActBlue Discounts	
Amount (\$) 4.74 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 3/9 Rpt:	2 FILER NAME Metrocrest Democrats	3 Filer ID (Ethics Commission Filers) 00080175
4 Date 02/06/2025	5 Payee name ActBlue Discounts	
6 Amount (\$) 0.20 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 02/10/2025	Payee name ActBlue Discounts	
Amount (\$) 1.19 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 02/13/2025	Payee name ActBlue Discounts	
Amount (\$) 0.40 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 02/20/2025	Payee name ActBlue Discounts	
Amount (\$) 2.37 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

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1 Total pages Schedule I: Sch: 4/9 Rpt:	2 FILER NAME Metrocrest Democrats	3 Filer ID (Ethics Commission Filers) 00080175
4 Date 03/06/2025	5 Payee name ActBlue Discounts	
6 Amount (\$) 0.20 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 03/13/2025	Payee name ActBlue Discounts	
Amount (\$) 0.40 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 04/06/2025	Payee name ActBlue Discounts	
Amount (\$) 0.20 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 04/13/2025	Payee name ActBlue Discounts	
Amount (\$) 0.40 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 5/9 Rpt:	2 FILER NAME Metrocrest Democrats	3 Filer ID (Ethics Commission Filers) 00080175
4 Date 04/14/2025	5 Payee name ActBlue Discounts	
6 Amount (\$) 1.19 <input checked="" type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 05/06/2025	Payee name ActBlue Discounts	
Amount (\$) 0.20 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 05/13/2025	Payee name ActBlue Discounts	
Amount (\$) 0.40 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions
Date 06/06/2025	Payee name ActBlue Discounts	
Amount (\$) 0.20 <input checked="" type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 366 Summer Street Somerville, MA 02144	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees	(b) Description (See instructions regarding type of information required.) Fee for processing contributions

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 6/9 Rpt:	2 FILER NAME Metrocrest Democrats	3 Filer ID (Ethics Commission Filers) 00080175
4 Date 01/20/2025	5 Payee name IONOS Inc.	
6 Amount (\$) 55.33 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 701 Lee Road Suite 300 Chesterbrook, PA 19087	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) web services	(b) Description (See instructions regarding type of information required.) web services
Date 03/06/2025	Payee name IONOS Inc.	
Amount (\$) 63.43 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 701 Lee Road Suite 300 Chesterbrook, PA 19087	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) web services	(b) Description (See instructions regarding type of information required.) web services
Date 03/18/2025	Payee name IONOS Inc.	
Amount (\$) 25.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 701 Lee Road Suite 300 Chesterbrook, PA 19087	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) web services	(b) Description (See instructions regarding type of information required.) web services
Date 04/14/2025	Payee name IONOS Inc.	
Amount (\$) 55.33 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 701 Lee Road Suite 300 Chesterbrook, PA 19087	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) web services	(b) Description (See instructions regarding type of information required.) web services

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 7/9 Rpt:	2 FILER NAME Metrocrest Democrats	3 Filer ID (Ethics Commission Filers) 00080175
4 Date 05/12/2025	5 Payee name IONOS Inc.	
6 Amount (\$) 55.33 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 701 Lee Road Suite 300 Chesterbrook, PA 19087	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Web seivces	(b) Description (See instructions regarding type of information required.) Web services
Date 05/27/2025	Payee name IONOS Inc.	
Amount (\$) 8.10 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 701 Lee Road Suite 300 Chesterbrook, PA 19087	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) web services	(b) Description (See instructions regarding type of information required.) web services
Date 06/12/2025	Payee name IONOS Inc.	
Amount (\$) 55.33 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 701 Lee Road Suite 300 Chesterbrook, PA 19087	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) web services	(b) Description (See instructions regarding type of information required.) web services
Date 03/03/2025	Payee name Mailchimp	
Amount (\$) 13.86 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) web services	(b) Description (See instructions regarding type of information required.) web services

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 8/9 Rpt:	2 FILER NAME Metrocrest Democrats	3 Filer ID (Ethics Commission Filers) 00080175
4 Date 01/21/2025	5 Payee name Mailchimp	
6 Amount (\$) 13.86 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) web services	(b) Description (See instructions regarding type of information required.) web services
Date 04/21/2025	Payee name Mailchimp	
Amount (\$) 13.86 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) web services	(b) Description (See instructions regarding type of information required.) web services
Date 05/19/2025	Payee name Mailchimp	
Amount (\$) 13.86 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) web services	(b) Description (See instructions regarding type of information required.) web services
Date 06/20/2025	Payee name Mailchimp	
Amount (\$) 13.86 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 675 Ponce de Leon Ave NE Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) web services	(b) Description (See instructions regarding type of information required.) web services

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 9/9 Rpt:	2 FILER NAME Metrocrest Democrats	3 Filer ID (Ethics Commission Filers) 00080175
4 Date 05/02/2025	5 Payee name NABCO	
6 Amount (\$) 193.80 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 11938 harry Hines Blvd Dallas, TX 75234	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Advertising Expense	(b) Description (See instructions regarding type of information required.) Banner Printing Services
Date 05/20/2025	Payee name New New Buffet	
Amount (\$) 17.15 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3822 Beltline Rd Addison, TX 75001	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) Dinner comp for speaker
Date 03/26/2025	Payee name USPS	
Amount (\$) 160.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 450 S Denton Tap Rd Coppell, TX 75019	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) PO Box rental