#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00016168 3 COMMITTEE NAME **OFFICE USE ONLY** Houston LGBTQ+ Political Caucus PAC Date Received **ELECTRONICALLY FILED** 11/04/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 66664 Houston, TX 77266-6664 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Aaron NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Rublein CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 17350 STATE HIGHWAY 249 STREET **ADDRESS** STE 220 #26779 (Residence or Business) Houston, TX 77064 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** PO BOX 66664 MAILING **ADDRESS** Houston, TX 77266-6664 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (713) 882-5898 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 December 5 March 5 September 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 09/26/2025 10/25/2025

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

					ı	
L2 COMMITTEE NAME  Houston LGBTQ+ Political Ci	aucus BAC				13 Filer ID 000161	(Ethics Commission Filers)
Houston EGBTQ+ Political Ca	aucus PAC				0001010	08
ACTIVITY (Identi	Candidates  fy by name or, if able, classify by party.)	A. Supported	Christian Menefe	ee US Rep CI	D18	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
(Descr	Measures ribe by date and location ction and nature of issue.)	A. Supported				
		B. Opposed				
A (Identi	Officeholders SSISTED fy by name or, if					
applica	able, classify by party.)					
TOTALS P	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. T	OTAL POLITICA	L CONTRIB			\$	14,575.00
EXPENDITURE 3. T	OTAL UNITEMIZED	D POLITICAL E	EXPENDITURES		\$	0.00
4. T	OTAL POLITICA	AL EXPENDIT	TURES		\$	15,187.18
	OTAL POLITICAL OF THE REPORTING		ONS MAINTAINED AS	OF THE LAST	DAY \$	30,333.08
	OTAL PRINCIPAL A		ALL OUTSTANDING L PERIOD	LOANS AS OF	THE \$	0.00
6 AFFIDAVIT						
			I swear, or affirm, und true and correct and in under Title 15, Election	ncludes all infor	erjury, that th rmation requi	e accompanying report is ired to be reported by me
				Aaron	Rublein	
				Signature of Ca		asurer
AFFIX NOTARY STAM	MP / SEAL ABOVE				, 0	
Sworn to and subscribed before	e me hy the said			+	thic tha	day
of, 20						uuy
			,			
Signature of officer administr	ering oath	Printed name	of officer administering	g oath	Title of c	officer administering oath

## MONTHLY FILING GPAC REPORT: PURPOSE

## FORM MPAC **ADDENDUM**

12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
Houston LGBTQ+ Political	Caucus PAC			00016168
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Alejandra Salinas City of Housto	on Council Member At-Large
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)			
OOMUTTEE				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Maria Benzon HISD Trustee Dis	strict V
(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.)		Michael McDonough HISD Trus	stee District VI
(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.)	I		

## MONTHLY FILING GPAC REPORT: PURPOSE

## FORM MPAC **ADDENDUM**

12 COMMITTEE NAME	Caucus DAC			13 Filer ID (Ethics Commission Filers)
Houston LGBTQ+ Political (	Caucus PAC	_		00016168
ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Audrey Nath` HISD Trustee Dis	trict VII
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
Ī	2. Measures	A. Supported		
[1	(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.)			
ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Lesley Guilmart Cypress-Fairba	nks ISD Trustee Position 5
(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.)			
ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Kendra Camarena Cypress-Fair	banks ISD Trustee Position 7
(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		
	Officeholders     Assisted (Identify by name or, if			

# **SUBTOTALS - MPAC**

# FORM MPAC COVER SHEET PG 3

				5	of 16
<b>17</b> CO	MMITTE	E NAME	18 Filer ID	(Ethics Commission Fil	lers)
l		GBTQ+ Political Caucus PAC	00016168	(Lunes Commission in	1010)
		E SUBTOTALS			
l		SCHEDULE		SUBTOTAL AMO	UNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 14	,575.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	PR	\$	
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$	
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 15	5,187.18
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruc	ction Guide explains how t	o complete this forn	n.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 6/16		
2	FILER NAME Houston LGE	BTQ+ Political Caucus PAC			3	Filer ID (Ethics Commission 00016168	on Filers)	
4	Date 10/08/2025	Full name of contributor		7	Amount of Contribution (\$)	\$250.00		
8	Principal occu	Houston, TX 77019 pation / Job title (See Instructions)	l q	Employer (See Instructions				
_	Executive Di			The R.O.C. Clinic	,			
	Date 10/01/2025	Full name of contributor  Briones, Lesley  Contributor address; City; State				Amount of Contribution (\$)	\$5,000.00	
	Houston, TX 77008  Principal occupation / Job title (See Instructions)  Employer (See Instructions)		)					
	Commission	er		Harris County				
	Date 10/01/2025	Full name of contributor out-of-state PAC (ID#:)  Brown, Denise  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00		
		Houston, TX 77004						
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Law Offices of Denise A		son-Brown PLLC		
	Date Full name of contributor out-of-state PAC (ID#:)  10/06/2025 Cox, Judge Jason  Contributor address; City; State; Zip Code  Houston, TX 77008			Amount of Contribution (\$)	\$2,500.00			
	Principal occu Judge	pation / Job title (See Instructions)		Employer (See Instructions Harris County	)			
	Date 10/15/2025	Full name of contributor out-of-state PAC (ID#:)  Davis, Pernell  Contributor address; City; State; Zip Code  Houston, TX 77002			Amount of Contribution (\$)	\$250.00		
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1	
	The Instru	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 2/4 Rpt: 7/16	
2	FILER NAME Houston LGE	BTQ+ Political Caucus PAC			3	Filer ID (Ethics Commission 00016168	on Filers)
4	Date 10/12/2025	Dunson, Judge Linda M.  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$250.00	
8	Principal occu Judge	Houston, TX 77267 pation / Job title (See Instructions)		Employer (See Instructions State of Texas	)		
	Date 10/07/2025	Full name of contributor  Evbagharu, Odus  Contributor address; City; State  Katy, TX 77449	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu Candidate	pation / Job title (See Instructions)		Employer (See Instructions Odus for Texas HD 135	)		
	Date 10/09/2025	Full name of contributor out-of-state PAC (ID#:)  Frye, Judge Phyllis  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
		Houston, TX 77005 pation / Job title (See Instructions)		Employer (See Instructions Not Employed	)		
	Not Employed  Date Full name of contributor out-of-state PAC (ID#:  10/14/2025 Hlavinka, Bryan  Contributor address; City; State; Zip Code  Houston, TX 77019				Amount of Contribution (\$)	\$500.00	
	Principal occu Engineer	pation / Job title (See Instructions)		Employer (See Instructions Siemens Energy	)		
	Date 10/09/2025	Full name of contributor out-of-state PAC (ID#:)  McGee, Sara  Contributor address; City; State; Zip Code  Hockley, TX 77447			Amount of Contribution (\$)	\$250.00	
	Principal occu Director of R	pation / Job title (See Instructions) adiology		Employer (See Instructions Memorial Hermann	)		
			·				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1	
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 3/4 Rpt: 8/16	
2	FILER NAME Houston LGI	BTQ+ Political Caucus PAC			3	Filer ID (Ethics Commission 00016168	n Filers)
4	Date 10/12/2025	6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$50.00	
8	Principal occu Neurologist	Houston, TX 77019 pation / Job title (See Instructions	s) <u>c</u>	Employer (See Instructions Audrey Nath MD PLLC	<u> </u> s)		
	Date 10/03/2025	Full name of contributor Poissant, Margaret  Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$250.00
	Principal occu Attorney	Houston, TX 77007 pation / Job title (See Instructions	5)	Employer (See Instructions Poissant Law Firm	<u> </u> s)		
	Date 10/10/2025	Full name of contributor out-of-state PAC (ID#:			•	Amount of Contribution (\$)	\$25.00
		Houston, TX 77008	,		Ĺ		
	IT Analyst	pation / Job title (See Instructions	5)	Employer (See Instructions Booz Allen Hamilton	5)		
	Date Full name of contributor out-of-state PAC (ID#:			•	Amount of Contribution (\$)	\$500.00	
	Principal occu Managemen	pation / Job title (See Instructions	5)	Employer (See Instructions	<u>l</u> S)		
	Date 10/05/2025	Full name of contributor				Amount of Contribution (\$)	\$250.00
	Principal occu lawyer	pation / Job title (See Instructions	(5)	Employer (See Instructions Unger & Hershkowitz P			

ETARY POLITICAL CONTRIBUTION	NS	3		SCHEDULE A1
he Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 4/4 Rpt: 9/16
FILER NAME Houston LGBTQ+ Political Caucus PAC			3	Filer ID (Ethics Commission Filers) 00016168
		7	Amount of Contribution (\$) \$500.00	
Houston, TX 77005 occupation / Job title (See Instructions)	9 E	mployer (See Instructions	)	
	struction Guide explains how to complete this for AME  a LGBTQ+ Political Caucus PAC  5 Full name of contributor out-of-state PAC (ID#:_ Watson, Fran  6 Contributor address; City; State; Zip Code  Houston, TX 77005	struction Guide explains how to complete this form.  AME  1 LGBTQ+ Political Caucus PAC  5 Full name of contributor out-of-state PAC (ID#:  Watson, Fran  6 Contributor address; City; State; Zip Code  Houston, TX 77005  occupation / Job title (See Instructions)  9 E	AME  1 LGBTQ+ Political Caucus PAC  5 Full name of contributor out-of-state PAC (ID#:) Watson, Fran  6 Contributor address; City; State; Zip Code  Houston, TX 77005	struction Guide explains how to complete this form.  AME  1 LGBTQ+ Political Caucus PAC  5 Full name of contributor out-of-state PAC (ID#: 7  Watson, Fran  6 Contributor address; City; State; Zip Code  Houston, TX 77005  occupation / Job title (See Instructions)  9 Employer (See Instructions)

### 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	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/7 Rpt: 10/16	Houston LGBTQ+ Political Caucus PAC 00016168
4 Date	5 Payee name
10/17/2025	1Vision
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$11,351.90	9346 Telge Rd.
Expenditure from corporate funds	Houston, TX 77095
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Endorsement Mailers
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/01/2025	ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$19.75	366 Summer St
Expenditure from	
corporate funds	Sommerville, MA 02144
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
	Transaction Fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/01/2025	ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$197.50	366 Summer St
Expenditure from corporate funds	Sommerville, MA 02144
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Transaction Fees
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	V

### 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	Al 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: 2/7 Rpt: 11/16	Houston LGBTQ+ Political Caucus PAC 00016168	
4 Date	5 Payee name	
10/03/2025	ActBlue Technical Services	
6 Amount (\$)	7 Payee address; City; State; Zip Code	_
\$9.88	366 Summer St	
Expenditure from corporate funds	Sommerville, MA 02144	
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  Transaction Fees	
	Transaction Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
experience to borione eye		
Date	Payee name	
10/05/2025	ActBlue Technical Services	
Amount (\$)	Payee address; City; State; Zip Code	
\$9.88	366 Summer St	
, , , , ,		
Expenditure from corporate funds	Sommerville, MA 02144	
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	
	Transaction Fees	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	п	
Date	Payee name	
10/06/2025	ActBlue Technical Services	
Amount (\$)	Payee address; City; State; Zip Code	
\$98.75	366 Summer St	
\$55.75		
Expenditure from corporate funds	Sommerville, MA 02144	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Fees Category (See Categories listed at the top of this schedule)  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Transaction Fees	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	H	

### 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 Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	<u> </u>
Sch: 3/7 Rpt: 12/16	Houston LGBTQ+ Political Caucus PAC 00016168
4 Date	5 Payee name
10/07/2025	ActBlue Technical Services
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$19.75	366 Summer St
Expenditure from corporate funds	Sommerville, MA 02144
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Transaction Fees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<del>1</del>
Date	Payee name
10/08/2025	ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$9.88	366 Summer St
, , , , ,	
Expenditure from corporate funds	Sommerville, MA 02144
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  Transaction Fees
	Transaction rees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/09/2025	ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$39.50	366 Summer St
Expenditure from	
corporate funds	Sommerville, MA 02144
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
	Transaction Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiente to benefit 6/01	'

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Candidate/Officeholder/Politica		
Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 4/7 Rpt: 13/16	Houston LGBTQ+ Political Caucus PAC 00016168	
4 Date	5 Payee name	_
10/09/2025	ActBlue Technical Services	
6 Amount (\$)	7 Payee address; City; State; Zip Code	_
\$9.88	366 Summer St	
Expenditure from corporate funds	Sommerville, MA 02144	
8 PURPOSE		_
OF OF	(a) Category (See Categories listed at the top of this schedule)  Fees  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Transaction Fees	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	4	
Date	Payee name	_
10/10/2025	ActBlue Technical Services	
Amount (\$)	Payee address; City; State; Zip Code	_
\$0.99	366 Summer St	
Expenditure from corporate funds	Sommerville, MA 02144	
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  Transaction Fees	
	Transaction Fees	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
Doto	B	_
Date 10/10/2025	Payee name ActBlue Technical Services	
Amount (\$)	Payee address; City; State; Zip Code	
\$19.75	366 Summer St	
Expenditure from		
corporate funds	Sommerville, MA 02144	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Transaction Fees	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	$\dashv$
expenditure to benefit C/OI		
		$\dashv$

### 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 Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 5/7 Rpt: 14/16	Houston LGBTQ+ Political Caucus PAC  00016168	
4 Date	5 Payee name	
10/12/2025	ActBlue Technical Services	
<b>6</b> Amount (\$) \$1.98	7 Payee address; City; State; Zip Code 366 Summer St	
Expenditure from corporate funds	Sommerville, MA 02144	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Fees Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/12/2025	ActBlue Technical Services	
Amount (\$)	Payee address; City; State; Zip Code	
\$9.88	366 Summer St	
ф9.00	500 Summer St	
Expenditure from corporate funds	Sommerville, MA 02144	
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	
	Transaction Fees	
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
Date	Payee name	
10/14/2025	ActBlue Technical Services	
Amount (\$)	Payee address; City; State; Zip Code	
\$19.75	366 Summer St	
Expenditure from corporate funds	Sommerville, MA 02144	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	Fees  Check if travel outside of Texas. Complete Schedule T.	
EXPENDITURE	Check if Austin, TX, officeholder living expense	
	Transaction Fees	
Operation Children	Open Highest (Office healths are now	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

### SCHEDULE F1

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

Food/Beverage Expense Gift/Awards/Memorials Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

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

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 6/7 Rpt: 15/16	Houston LGBTQ+ Political Caucus PAC 00016168
4 Date	5 Payee name
10/15/2025	ActBlue Technical Services
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$9.88	366 Summer St
Expenditure from corporate funds	Sommerville, MA 02144
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Transaction Fees
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Dayso name
10/01/2025	Payee name ActBlue Technical Services
Amount (\$)	Payee address; City; State; Zip Code
\$98.75	366 Summer St
Expenditure from corporate funds	Sommerville, MA 02144
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.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Transaction Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to serious ever	
Date	Payee name
10/14/2025	Intuit Inc
Amount (\$)	Payee address; City; State; Zip Code
\$138.58	2800 E. Commerce Center Place
Expenditure from corporate funds	Tucson, AZ 85706
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Accounting Software
Complete ONLY if disease	Condidate Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### 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 Capter a cottogen and 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: 7/7 Rpt: 16/16	Houston LGBTQ+ Political Caucus PAC 00016168
4 Date	5 Payee name
10/06/2025	KROGER
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$125.95	1938 W Gray
Expenditure from corporate funds	Houston, TX 77019
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	Water for volunteers
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/02/2025	The Golden Leaf Floral and Design Inc
Amount (\$)	Payee address; City; State; Zip Code
\$2,995.00	919 Bunton Street
Ψ2,000.00	old Bullott Guidet
Expenditure from corporate funds	Houston, TX 77009
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
_/	Check if Austin, TX, officeholder living expense
	Event Decorations
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held